

**South Carolina
Department of
Disabilities and
Special Needs**

Regional Center

**Emergency
Preparedness Plan**

June 2020

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Purpose

In accordance with South Carolina Department of Disabilities and Special Needs (DDSN) Directive 100-25-DD, “Disaster Preparedness Plan for DDSN and Other DSN Providers of Services to People with Disabilities and Special Needs” <https://ddsn.sc.gov/sites/default/files/Documents/Quality%20Management/Current%20Directives/100-25-DD%20-%20Revised%20%28080916%29.pdf> and Centers for Medicare & Medicaid Services (CMS) State Operations Manual, Appendix Z, “Emergency Preparedness for All Provider and Certified Supplier Types” https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_z_emergprep.pdf, the following procedures have been established to address the immediate requirements for a major disaster or emergency in which normal operations are interrupted and special measures must be taken to:

- Save and protect the lives of consumers and employees;
- Manage immediate communications and information regarding emergency operations and campus safety;
- Provide essential services and operations;
- Provide and analyze information to support decision-making and action plans;
- Manage resources effectively in an emergency operation.

Definitions

1. **All-hazards Approach** - An integrated approach to emergency preparedness that focuses on identifying hazards and developing emergency preparedness capacities and capabilities that can address those as well as a wide spectrum of emergencies or disasters. This approach includes preparedness for natural, man-made, and/or facility emergencies that may include but is not limited to: care-related emergencies; equipment and power failures; interruptions in communications; loss of a portion or all of a facility; and, interruptions in the normal supply of essentials, such as water and food.
2. **Emergency Operations Center (EOC)** - The command post for all disaster related situations, activated by the Facility Administrator or designee. After normal office hours, the Administrative Officer of the Day (AOD) will set up the EOC until relieved by an administrator.
3. **Emergency Preparedness Plan** – A facility’s comprehensive approach to meeting the health, safety, and security needs of the facility, its staff, their patient population and community prior to, during and after an emergency or disaster. The program encompasses four core elements: an Emergency Plan that is based on a risk assessment and incorporates an all-hazards approach; Policies and Procedures; Communication Plan; and the Training and Testing Program.
4. **Essential Employees** – The personnel needed to maintain essential services.
5. **Full-scale Exercise** - An operations-based exercise that typically involves multiple agencies, jurisdictions, and disciplines performing functional and integration of operational elements involved in the response to a disaster event (i.e., “boots on the ground” response activities).
6. **High Risk Watch** – An unofficial designation used by the Facility Administrator or his designee to describe deteriorating weather conditions during an official watch.
7. **Hurricane Watch** – An official National Oceanic and Atmospheric Administration (NOAA) designation meaning that hurricane conditions are possible in the area within the next 48 hours.
8. **Hurricane Warning** – An official NOAA designation that hurricane conditions (sustained winds of 74 mph or higher) are expected in the warned area within the next 36 hours. These winds may be accompanied by storm surge, coastal flooding, and/or river flooding.
9. **Risk Assessment** – A process used to assess and document potential hazards that are likely to impact the geographical region, community, facility, and patient population and identify gaps and challenges that should be considered and addressed in developing the emergency preparedness plan.

10. **Severe Weather Watch** – Atmospheric conditions indicate severe weather is possible, but has not yet occurred.
11. **Severe Weather Warning** – A series of weather conditions have developed with the potential to cause serious damage and possible loss of life.
12. **Shelter-in-place** – A method used to protect consumers and staff from the effects of a man-made or natural disaster. Using this method, everyone remains inside the residences or other permanent buildings until it is safe to go outside.
13. **Tabletop Exercise (TTX)** – An exercise that involves key personnel discussing simulated scenarios in an informal setting. TTXs can be used to assess plans, policies, and procedures. A tabletop exercise is a discussion-based exercise that involves senior staff and other key decision making personnel in a group discussion centered on a hypothetical scenario. TTXs can be used to assess plans, policies, and procedures without deploying resources.
14. **Tornado Watch** – Conditions indicate the potential threat of a tornado is possible in and near the watch area.
15. **Tornado Warning** – A tornado has been sighted or indicated by weather radar meaning there is imminent danger to life and property.
16. **Watch** – The specific condition is possible. Watches typically span over a large geographical area for long periods of time.
17. **Warning** – The specific condition is occurring or is imminent. Warnings span over much smaller areas for smaller, definite periods of time.

Emergency Operations Center (EOC)

1. At the start of the pending or actual disaster the EOC will be set up in the Administration Building Conference Room with two people in charge at all times.
2. Charge personnel will work from midnight to noon and noon to midnight and 6 AM to 6 PM and 6 PM to 6 AM.
3. When the shift changes at the EOC, current and new personnel will make rounds through all units and departments.
4. EOC division of duties will be into two categories:

<u>Individual & Staff Needs</u>	<u>Physical Plant Needs</u>
<ul style="list-style-type: none"> • coordination of medical care • scheduling of employees • time-keeping of employees overtime • supervising non-direct care employees and assigning of work details • coordinating relief efforts for employees during the recovery phase of the disaster • interface with the Red Cross and other relief agencies supervising the people side of an evacuation to other areas of the city, county, state or nation 	<ul style="list-style-type: none"> • Preparing the physical plant for an impending disaster • Making arrangements for temporary bathing and toileting for all Individuals and staff for at least three days • Making arrangements for temporary bathing and toileting for all individuals and staff not using the existing water and sewer system • Making arrangements to evacuate by contracting with outside providers • Setting up a system to shuttle staff back and forth to their temporary evacuation centers • Contracting with Central Office and other outside providers to assure the structural integrity of structures after the disaster • Contracting with outside agencies to clean and remove debris

Emergency Phases

1. **Pre-Emergency Phase:**

- a) Prepare plans to provide disaster/emergency response procedures for specific types of disasters or emergencies.
- b) Review at least every 2 years the facility's Emergency Preparedness Plan.
- c) Provide training, education, drills to ensure appropriate responses during actual disasters or emergency situations.
- d) Establish location, operational procedure for the EOC.

2. **Pre-Impact Phase:**

- a) The Facility Administrator or designee will monitor the emergency situation through appropriate information sources, activate the EOC as necessary, and notify key personnel of the impending disaster/emergency.
- b) Action and preparations will be made at the earliest sign of a potential disaster/emergency to include procuring additional supplies such as non-perishable food items and canned goods, bottled water and beverages, additional quantities of medications from the pharmacy, and filling fuel tanks and all emergency generators to capacity.
- c) Facility grounds and buildings will be secured.
- d) If day programs are in progress, a determination will be made whether to continue or discontinue in favor of relocating to residential units.
- e) Employee accommodations will be made at the direction of the Facility Administrator.

3. **Impact Phase:**

- a) The EOC will remain activated for the duration of the disaster/emergency situation.
- b) Contact will be maintained with the County Emergency Preparedness Office and DDSN Central Office staff to keep them apprised of the situation.
- c) The Switchboard Operator will monitor emergency information sources, check communication equipment both internally and externally, establish contact with appropriate state and local authorities, and activate emergency communication networks as required.
- d) The EOC will organize and dispatch emergency medical personnel to the appropriate areas as necessary and damage assessment teams as required to assess for casualties, facility damage, and status of evacuees.
- e) Assistance will be provided to local governments upon request.

4. Recovery Phase:

a) Alleviation Activities:

Alleviation includes all temporary means available to reinstate facility autonomy, provide essential services, and meet human needs.

- EOC will ensure that all people are advised of conditions and are provided with instructions on recovery measures.
- EOC will caution affected services to maintain their emergency posture and to keep communication lines open.
- EOC will determine need and appropriate action to be taken to reestablish essential services to include emergency medical care, sewage and garbage disposal, safe water, safe gas and electrical services, transportation, telephone, and debris removal. The Director of Physical Plant will determine if buildings are habitable.

b) Rehabilitation Activities:

These activities include the permanent restoration of property and the full reinstatement of services and active treatment programs.

- At the earliest possible time, the EOC will establish priorities to implement restoration of all services and programs.
- The EOC will continue to assess damage and report findings to key personnel.
- The EOC will continue to maintain all communication systems, stay in contact with appropriate local and state authorities, and monitor all appropriate emergency information systems.
- The EOC will continue to operate until all essential services have been reestablished.

Functions/Responsibilities

1. SCDDSN Administration:

- a) Assure that regional facilities have established regional disaster/emergency preparedness plans, resources and procedures for implementation and action should a disaster/emergency occur;
- b) Request through the State Director the support and assistance of other state and federal agencies when deemed necessary and appropriate;
- c) Provide warning of impending disaster to regional facilities.

2. The State Director:

- a) Proclaims a local state of emergency in a threatened or stricken region when it is determined the situation is beyond the response capability of the affected region;
- b) Approves prior to release, all news releases related to a disaster/emergency;
- c) Suspends provisions of existing regulations and procedures when they prevent, hinder, or delay necessary action in coping with a disaster;
- d) Directs the utilization of all available agency resources as reasonably necessary to cope with the disaster;
- e) Transfers personnel or functions of facility resources for purposes of facilitating or performing emergency services as necessary or desirable;
- f) Delegates authority to the Facility Administrator as deemed necessary to ensure timely response to disaster situations at the facility.

3. Regional Centers:

- a) The Facility Administrator is responsible for pre-disaster/emergency planning and action at the facility;
- b) When a disaster/emergency occurs or is imminent, the State Director will be immediately notified;
- c) The Facility Administrator or AOD will take immediate and effective steps to protect life and property;
- d) The Facility Administrator or designee will request the support and assistance of the State Director when deemed necessary and appropriate;
- e) The facility will execute the plan by implementing an annual disaster drill, and a quarterly fire evacuation drill for each shift.

4. Facility Administrator/Designee:

- a) Notifies State Director of all dangerous or disaster situations;

- b) Provides for the safety, security, and welfare of all within the facility and suspends provisions of existing regulations and procedures when they prevent, hinder or delay necessary action in coping with a disaster;
- c) Directs the utilization of all available facility resources as reasonably necessary to cope with the disaster;
- d) Notifies the County Emergency Preparedness Office of all disaster situations and the need for assistance;
- e) Transfers personnel or functions of the facility for purpose of facilitating or performing emergency services, internally or externally, as deemed necessary;
- f) Directs overall operations;
- g) Evaluates and acts on request for assistance from others;
- h) Directs evacuation of areas affected or threatened by a disaster;
- i) Coordinates public information services with State Director or designee;
- j) Directs search and rescue operations;
- k) Delegates authority, as deemed necessary, to ensure timely response to disaster/emergency situations.

5. Administrative Officer of the Day:

The AOD will be in charge of the EOC in the absence of the Facility Administrator or designee until arrival.

6. Service Directors:

- a) Ensure the health and safety of all in their charge;
- b) Provide additional support to incident command as directed by the Facility Administrator;
- c) Ensure that all employees under their supervision receive appropriate training relevant to disaster/emergency situation;
- d) Protect active records under their control;
- e) Provide counseling services to meet emotional needs of all people at the facility;
- f) Prepare necessary reports and evaluates disaster operation.

7. Employees:

- a) Expected to report to work during a disaster/emergency;
- b) Should make arrangements and preparations to work as needed;
- c) Expected to remain at work unless specifically released by the Facility Administrator or designee.

Mary Poole
State Director
Patrick Maley
Deputy Director
Rufus Britt
Associate State Director
Operations
Susan Kreh Beck
Associate State Director
Policy
W. Chris Clark
Chief Financial Officer



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Vice Chairman
Lorri S. Unumb
Secretary
Barry D. Malphrus
David L. Thomas

3440 Harden Street Ext (29203)
PO Box 4706, Columbia, South Carolina 29240
803/898-9600
Toll Free: 888/DSN-INFO
Home Page: www.ddsn.sc.gov

MEMORANDUM

TO: All Regional Center Employees
FROM: Nancy M. Hall, Director
Regional Center Operations
DATE: March 24, 2020
SUBJECT: Essential Employees

All South Carolina Department of Disabilities and Special Needs (SCDDSN) Regional Centers operate 24 hours per day, 365 days per year. As a human services facility, we must maintain essential services at all times. A Governor's Declaration of Emergency and subsequent closing of non-essential state offices does not close Regional Centers. All Regional Center staff are considered essential and are expected to report to work as scheduled.

You may be reassigned to a different area during the event of an emergency based on the needs of the campus. The Administrative Officer of the Day, along with the Facility Administrator, will determine where the needs may be and make these reassignments based on their assessments.

The consumers that reside at our Regional Centers depend on all of us daily to ensure their health and safety are not compromised. You each play a vital role in this care, thus the reason you are each essential employees during an emergency.

All essential staff are expected to follow SCDDSN directives.

Thank you.

cc: Mr. Rufus Britt, Associate State Director of Operations
Ms. Liz Lemmond, Director of Human Resources

I. Core Element: Emergency Plan

1. **All-hazards risk assessment**: (see Appendix A)
2. **Consumer population risk/needs assessment**: (see Appendix B)
3. **Collaboration with state/local officials**: (see Appendix C)

II. Core Element: Policies and Procedures

1. **Subsistence needs for consumers/staff**: (food, water, medical and pharmaceutical supplies; alternate sources of energy to maintain temperatures, emergency lighting, fire detection, extinguishing, and alarm systems; sewage/waste disposal, etc.)
 - a) Purpose:

To establish procedures to ensure proper levels of emergency supplies to include water, food, medicine, first aid, clothing, maintenance, personal hygiene items, and other necessary supplies.
 - b) Situation:

In the event of a disaster or an emergency, normal supply channels may be interrupted for an indefinite period of time. It is necessary for the operation of the facility to maintain sufficient supplies to operate without aid from normal suppliers.
 - c) Concept of operation:
 - Director of Supply Services will ensure that proper levels of needed supplies are ordered and maintained for all departments for emergency use.
 - Service Directors will maintain proper levels of emergency supplies and store them in an area that is easily accessible in the event of an emergency. Supplies will be inventoried and replenished as needed.

COASTAL CENTER

Maintenance:

Item	Unit of Issue	Quantity
Generator-220/320		1
Generator-420		1
Generator-520		1
Generator-620		1
Generator-110		1
Generator-210		1
Generator-310		1
Generator-B1/510		1
Generator-710		1
Generator-810		1
Generator-910		1
Generator-Centerview		1
Generator-Kitchen/Warehouse		1
Generator-large 60KW		1
Generator-small		4
Flashlight-D cell		25
Flashlight-6 V lantern		25
Safety Helmets		12
Work Gloves-medium	case	1
Work Gloves-large	case	1
Rubber Boots		13
Chainsaw		2
Tarps		40
Diesel Fuel-500 gallons		1
Gasoline-500 gallons		1
Plywood-3/4 inch	4x8 sheets	as needed

Food Services:

Item	Unit of Issue	Quantity
Non-food:		
Plates-disposable	9 inch	3000
Plates-disposable	6 inch	3000

Bowls-disposable	12 oz.	3000
Spoons-disposable		3000
Forks-disposable		3000
Knives-disposable		3000
Foil-aluminum	roll	3
Wrap-plastic	roll	3
Cups-cold	case	4
Cups-hot	case	4
Napkins	case	2
Ice chest	48 qt.	12
Gloves-food	box	64

Item	Unit of Issue	Quantity
Food:		
Beef Stew	case	4
Chili Beans	case	4
Corned Beef Hash	case	4
Ham	case	8
Eggs	case	10
Tuna	case	4
Turkey Breast	each	12
Meat Patty	case	10
Sausage	case	3
Pureed Chicken	case	2
Pureed Beef	case	2
Pureed Pork	case	2
Pureed Beets	case	2
Pureed Squash	case	2
Pureed Green Beans	case	2
Pureed Spinach	case	2
Pureed Peas	case	2
Jarred Food-meat	case	2
Jarred Food-vegetable	case	2
Jarred Food-fruit	case	2
Fruit Sauce	case	2
Fruit-assorted canned	case	6

Item	Unit of Issue	Quantity
Food:		
Vegetable-assorted canned	case	25
Cereal-assorted dry	case	12
Crackers-individually wrapped	case	4
Rice	pound	200
Pasta Shells	case	3
Cookies	case	10
Bread	loaves	100
Pudding	case	6
Jelly-individually wrapped	case	4
Apple Sauce	case	3
Water-bottled	case	35
Gatorade	case	4
Milk-whole	case	4
Juices-assorted	case	25
Tea	case	2
Coffee-instant	case	2
Beverage Mix	case	4
Bouillon-chicken	case	1
Bouillon-beef	case	1
Sugar-individual	case	4
Sweet and Low	case	2
Mayonnaise	gallon	1
Mayonnaise-individual	box	3
Mustard-individual	box	3
Ketchup-individual	box	3
Supplement-Ensure		2 week supply
Supplement-Ensure Plus		2 week supply
Supplement-Ensure Pudding		2 week supply
Supplement-Glucerna		2 week supply
Supplement-Pedialyte		2 week supply
Supplement-Pediasure		2 week supply
Supplement-Jevity 1.5 cal		2 week supply
Supplement-Osmolite 1.2		2 week supply
Supplement-Osmolite 2		2 week supply
Supplement-Vital Jr.		2 week supply
Supplement-Two cal HN		2 week supply
Supplement-Pulmocare		2 week supply

Medical and Nursing:

Item	Unit of Issue	Quantity
Band-aids	box	6
4" x 4" dressings	box	8
Ace bandage-3 inch	box	8
Ace bandage-2 inch	box	8
Alcohol Wipes	box	4
Adhesive tape-1/2 inch	roll	4
Kling dressing	roll	12
Eye Pads	box	2
Tongue Blades	box	1
Finger Splints-aluminum	box	1
Gloves-various sizes	box	6
Gloves-latex free	box	4
Suture Sets	each	2
Splints-inflatable	each	20
Universal Precaution Kits	each	20
Bio-hazard Bags	each	10
Patient ID Bracelet Bands	Each	1000

Supply Services:

Item	Unit of Issue	Quantity
Batteries-AA		as needed
Batteries-C		as needed
Batteries-D		as needed
Batteries-9V		as needed
Batteries-6V lantern		as needed
Beverage Dispenser-20 gallon	each	12
Handled Bucket-5 gallon	each	50
Handled Bucket-2.5 gallon	each	25
Trash Can-55 gallon	each	20
Toilet Paper	case	15
Name Tags-Sticky	each	2000
Sani-Wipes	case	50
Paper Towels	case	18
Sanitary Napkins	case	6

Sanitary Tablets	jar	10
Deodorant	each	90
Toothpaste	each	90
Can Opener-manual	each	20

Supply Services:

Item	Unit of Issue	Quantity
Vinyl Gloves-medium	case	15
Vinyl Gloves-large	case	15
Latex-free Gloves-medium	case	5
Latex-free Gloves-large	case	5
Hand Dispenser Fill Soap	case	10
Washing Machine Soap-5 gallon	bucket	15
Linen		as needed
Blankets	each	100
Bed Cots	each	60
Mattresses	each	50
Disposable Adult Briefs-Medium	case	40
Disposable Adult Briefs-Large	case	40

Emergency Bucket Supplies for Distribution to Each Building:

Item	Unit of Issue	Quantity
Motorola Walkie Talkie radio		1
Emergency Bucket	case	1
Can Opener-manual		1
4"x4" dressings	each	25
2"x2" dressings	each	25
Ace Bandage-3 inch	each	2
Ace Bandage-2 inch	each	2
Kling dressing	each	3
Kerlix Bandage	each	3
Adhesive Tape-1.5 inch	each	3
Splints-arm	pair	2
Splints-leg	pair	2

Triangular bandages	box	1
Band-aids	box	1
Hydrogen Peroxide	pint	1
Scissors		1
Flashlight		1
Batteries-D-cell		2

MIDLANDS CENTER

Emergency Generators:

1. Stationary full power: Palmetto, Mesquite, Sycamore, Oak, Palm, Willow, Chestnut, Juniper, Walnut, Cedar, Magnolia, Program Building, and Main Kitchen area.
2. Stationary partial power: AOD/Nursing area in the Plaza, the Dental Clinic, and Sequoia.
3. Portable generators: 5 in emergency storage shed, 1 on trailer
4. The Training Center and Poplar are prewired for the large generator on the trailer.

Water: Each residence has two water cans, and additional cans are available through Supply.

Food: A large gas grill is maintained in the Plant Operations area. The main kitchen area has cooking capability and freezers on emergency power.

Physical Hazards (i.e., ice and snow):

- Emergency storage - ice melt, snow shovels (storage shed)
- Plant Operations - ice melt, sand (Plant Operations storage shed)

Medical Emergency Kits: Medications and medical supplies will be maintained by the emergency treatment team comprised of a physician/nurse practitioner and two registered nurses or licensed practical nurses.

PEE DEE/SALEEBY CENTER

During Hurricane season the Food Service Department increases the amount of food products on hand to ensure adequate supply according to the current

populations and projected evacuee numbers. Contact with the other DDSN facilities is maintained to assist as well as coordinate the needs for the exact population.

Emergency Food and Supplies List:

Responsible: Food Service Director

Non-food Supplies:	Pack size	Pee Dee	Saleeby
Disposable Plate, 9", plastic	500	6cs	
Disposable 6" Plate, paper	1000	4cs	
4oz Squat Bowls, Styrofoam	1000		2
5oz Soufflé Bowl, plastic	2500	4cs	
Lids for soufflé bowl	2500	2	2
Plastic spoons	1000	6	
Plastic forks	1000	2	
Plastic knives	1000	1	
Picnic Pack	250	6	1
Foil	18x1000	6	2
Film	18x1000	6	
Cups, 8oz hot, paper	1000	4	1
Cups, 8oz Styrofoam	1000		3
Cups, 9oz paper	2400	4	
Hinged food containers	200		6
Napkins	4000	3	1
Can Liners	250	5	1
Gloves, med	10/100	1	1
Gloves, large	10.100	1	1
Aluminum 3 tray	250	5	1
Bleach	6/96	2	1

Industrial Can opener	1	2	1
Household Can opener	1	6	
5g Beverage Containers	1	6	2
Food Supplies	Pack Size	Pee Dee	Saleeby
Diced Chix	10#	10	2
Pulled Turkey	10#	10	
Ground Turkey	2/10#		2
Chicken & Dumplings	12/50oz	6	2
Hamburger Patties	50ea	10	4
Tuna	6/4#	4	1
Turkey Breast	2/8#	6	1
Ham	2/11#	3	
Ground Ham	10#		2
Scrambled Eggs	6/5#	4	1
Lasagna, Sausage	6/4#	10	
Lasagna, Chicken	6/4#	10	
Bologna	2/10#	2	
Ground Beef	8/10#	2	
Ground Beef	10#		4
Sliced Cheese	6/5#	1	
Diced Pork	10#	4	2
Salmon	6/4#	2	2
Gatorade	12/3oz	2	1
Applesauce	72/4oz	6	8
Dry Milk	6/5#	1	1
Milk, VARIETY	50/ 8oz	15	6
Juice, Frozen VARIETY	96/4oz	30	
Juice, VARIETY	12/46oz	15	
Juice, individual VARIETY	48/cs		20
Juice, thickened VARIETY	48/cs	2	20
Beverage mix	1 jar	8	4

*Bottled Water	3/1g	100	12
Milk, Nectar Consistency	27/cs		4
Milk, Honey Consistency	27/cs	3	6
Tea, Nectar Consistency	24/4oz		2
Tea, Honey Consistency	24/4		4
Water, Nectar Consistency	24/4	2	2
Water, Honey consistency	24/4	2	4

Texture Modified Food		Pack Size	Pee Dee	Saleeby
Pureed Meat	Beef	24/16oz	4	10
	Chicken	24/16oz	4	10
	Pork	24/16oz	2	10
	Turkey	24/16oz	2	10
	Ham	24/16oz		6
Vegetables	Peas	24/16oz	2	6
	Squash	24/16oz	2	6
	Carrots	24/16oz	2	6
	Grn.	24/16oz	2	6
Beans				
	Spinach	24/16oz		6
Fruit	Variety	6/68oz	6	10
Baby Food				
Meat	Variety	24/2.5oz	4	50
Vegetables	Variety	24/4oz	4	30
Fruit	Variety	24/4	4	30
Cereal	Variety	24/4	4	20
Other Foods		Pack Size	Pee Dee	Saleeby
Instant Grits		12/12pk	1cs	
Dry Cereal	Variety	96/cs	6	

Crackers, indiv Variety	Varies	6	2
Cookie Crumbs	Varies		1
Fruit Variety	6/10	10	3
Cookies Variety	Varies	6	3
Vegetables Variety	6/10	20	10
Pudding Variety	6/10	4	2
Snack Pak Pudding	48/cs	8	8
Jell-O cup	48/cs	8	
Mayonnaise	4/1g	4	1
Mustard	24/8oz	2	
Ketchup	6/10	1	1
Ketchup	12/17oz	2	
Cornbread Mix	6/5#	2	1
Biscuits, frozen	216ea	2	1
Bread or rolls	20sl/loaf	15	10
Vegetables, Frozen, Variety	Varies	15	6
Thicken Rite	8/10	3	10

Emergency Medical Supplies:

Responsible: Nurse Administrator or Designee;

Storage Location: Medical Service Building (Supply Closet)

Item	Quantity
Band-Aids	3 boxes
Liquid Band-Aid	1 box
4"X4" cover sponge dressing	2 boxes (50 each)
Ace bandages 3"	8 each
Alcohol wipes	4 boxes
Betadine Swabs	1 box (50 each)
Kling dressing	3 rolls
Tongue blades	1 box (500 each)
Finger splints	1 box
Gloves-Medium	1 boxes
Gloves-Large	1 boxes
Tape-cloth 1 "	4 rolls
Bio hazard bags	3 bags

Cold/Hot Packs	3 each
Steri Strips	2 boxes
Arm Slings	2 each
Bandage scissors	2
Flashlight w batteries	2
Sterile saline solution 100 ml.	3 bottles
Cotton tipped applicators	1 pack of 100
Alcare foam hand cleaner	2 cans
Blood pressure cuff	1
Stethoscope	1
Wipes, Sani cloth Germicidal (Green Top) for surfaces	2 canisters
Bacitracin Ointment	1 tube

Emergency Kit in the supply closet in Medical Services separate from the regular inventory.

Each nurse's station Campus maintains a PAR inventory of medical supplies restocked every 2 weeks.

Emergency Maintenance Supplies:

Responsible: Maintenance Director;

Storage Location: Maintenance Building

Emergency Maintenance Supplies	Quantity	
	Pee Dee	Saleeby
Work Gloves	12 Pr.	4 Pr.
Rain Gear	18	4
Chain Saws	2	1
Snow Chains	2 Sets	1 Set
Windshield De-icer	5	5
Diesel Fuel	55 Gal.	20 Gal.
Rock Salt	800 lbs.	200 lbs.
Chain	80 ft.	80 ft.

Emergency EOC Supplies:

Responsible: Procurement Officer;

Storage Location: Warehouse Building

Item	Quantity
Motorola W/T radio	1
Disaster/Emergency Supply Contained	1 per unit

Can opener (manual)	1
4X4 dressings	1
2X2 dressing	1
Ace bandage 3"	2
Ace bandage 2"	2
Kling dressing	3
Kerlix bandage	3
Adhesive tape 1.5"	3
Splints, arm	2 pair
Splints, leg	2 pair
Triangular bandages	20
Band-Aids	1 box
Hydrogen peroxide 1 pint	2
Scissors	1
Flashlight	1
Batteries D-cell	2
Name Badges	1000
Cots	16

Emergency Supportive Supplies:
Responsible: Procurement Officer

Emergency Supportive Supplies	Size	Unit	Quantity
Batteries*	AA	Case	2
Batteries*	C	Case	4
Batteries*	D	Case	6
Batteries*	9V	Case	1
Batteries (lantern)*	6V	Case	10
Patient ID bracelet bands-		1000	
Name tags (stick on type)-		2000	
Toilet paper		Case	2
Large beverage Administer with spigot (labeled for drinking water only)	20 gal	Each	25
Hard plastic bucket with handle	5 gal	Each	100
Hard plastic bucket with handle	2.5 gal	Each	25
Trash can (plastic)	40 gal	Each	20

Sleeping Bags		Each	28
Vinyl Cover Mattresses	Single	Each	60

*Batteries will be stored in walk-in refrigerator of Food Service Department

Emergency Supplies for Self-Care:

Responsible: Procurement Officer;

Storage Location: Warehouse Building

Emergency	Size	Unit	Quantity
Disposable hand and diaper wipes-	Case	50	
Disposable diapers	Small	Case	3
Disposable diapers	Medium	Case	19
Disposable diapers	large	case	5
Disposable diapers	Toddler	box	1

Drinking Water and Fluids:

1. The Food Service Director will be responsible for maintaining a contract with the milk provider or National Guard to furnish a tanker truck of water after a disaster.
2. Food Service has containers that will be specifically used to provide water and fluids in all departments and units. These containers will be labeled showing they contain drinking water and the container will have spigots.
3. The Center must have enough water and fluids to supply 300 people at Pee Dee Center and 200 people at Saleeby Center for three days.
4. The Administrator, Medical Services will be responsible to see that the employees assist with water storage and distribution duties.

Emergency Generators:

Facilities have full generator power in an emergency (HVAC, light, etc.).

WHITTEN CENTER



**Senior
Catering**
ESTABLISHED IN 1964 AS A NON-PROFIT CORPORATION

Administrative Office
314 Main Street
Little Mountain, SC 29075
803-345-1835 • Fax 803-345-7720
www.SeniorCatering.com

March 5, 2020

Randy Davis
Whitten Center
P.O. Box 239
Clinton, SC 29325

Dear Mr. Davis:

This correspondence verifies that should there be an emergency at your food preparation facility, Senior Catering will provide meals for your clients. We currently are serving approximately 3,500 meals from our Newberry facility, which has the capacity to serve 5,000 meals per day.

Each Monday through Friday Senior Catering prepares a hot noon, day meal which meets the DSN requirements. We also have a "Deli" meal, which usually consists of a sandwich and fruits etc. This could be used as the evening meal and also meets DSN's requirements.

We also have frozen meals on hand, which could be used for breakfast and/or weekend meals.

Senior Catering has 53 cargo vans, of which, several are considered "spare" vehicles at the Newberry kitchen facility. These vans would be available to deliver your meals to Clinton.

Please give us a call if you are in a situation where you require meals.

Sincerely,

Rowan Goodrich
Executive Director

RG:ec

Bennettsville Kitchen
1106 Frank W. Evans Way
Bennettsville, SC 29512
843-454-0555

Newberry Kitchen
114 County Park Road
Newberry, SC 29108
803-276-1891

Orangeburg Kitchen
2570 Old St. Matthews Road
Orangeburg, SC 29115
803-531-4395

St. Stephen Kitchen
4020 Byrnes Drive
St. Stephen, SC 29479
843-567-5977

SENIORS CATERING TO SENIORS,
"Good Food For Life"

Emergency Generators:

Building	Make	Size	Fuel Type	Remarks
102/104	Katolight	100 kw.	Natural Gas	E.M. Lights/Some AC/Kitchen
103/105	Katolight	100 kw.	Natural Gas	E.M. Lights/Some AC/Kitchen
106	Baldor	40 kw.	Natural Gas	E.M. Panel/Some AC/Kitchen
107	Baldor	40 kw.	Natural Gas	E.M. Panel/Some AC/Kitchen
108	Baldor	40 kw.	Natural Gas	E.M. Panel/Some AC/Kitchen
110	Baldor	40 kw.	Natural Gas	E.M. Panel/Some AC/Kitchen
Administration	Generac	25 kw.	Natural Gas	SB/Conf. Room/E.M. Panel
201	Magnetek	275 kw.	Natural Gas	Entire Unit
204	Katolight	230 kw.	Diesel/3000 gal.	Entire Unit
205	Blue Star	150 kw.	Natural Gas	Entire Unit
207	Olympian	75 kw.	Natural Gas	E.M. Panel/Some AC/Kitchen
209	Olympian	75 kw.	Natural Gas	E.M. Panel/Some AC/Kitchen
202	Blue Star	50 kw.	Natural Gas	Telephone System/E.M. Panel
Multi-Purpose Bldg.	Lynx	80 kw.	Natural Gas	Entire Building
New Kitchen	Magnetek	780 kw.	Diesel/1000 gal.	Entire Building
Water Tank	Generac	10 kw.	Natural Gas	Radio System
Mobile Generator	Magnetek	55 kw.	Diesel/200 gal.	Emergency Use

Regional Center Sewage Removal

1. Sewer system is inoperative:

- The Procurement Officer will purchase and store 100 five-gallon hard plastic buckets with handles. The Procurement Officer will purchase and store 25 short hard plastic buckets with handles. They should not be any longer than a heavy-duty trashcan is wide.
- The buckets are portable toilets in each department and unit if the buildings are habitable.
- If buildings are not habitable, a central latrine will be set up at various locations with blankets and sheets used as screens. When the bucket is half-full, the person using the bucket will carry it to designated disposal sites.
- The Maintenance Director will be responsible for designating a person to have holes dug and the contents of the buckets poured in the holes, and incinerate the fecal matter with diesel fuel. Fuel will be stored in the maintenance department, which can be moved to the site of the latrine.

2. Sewer system is intact but will not operate due to lack of water:

- The toilets will flush if you pour about 2 gallons of water in the bowl.
- The Director of Food Service will be responsible for the transport and distribution of flush water to each building, which is habitable, or in use after the disaster.
- Midlands Center and Pee Dee Center have swimming pools and can transport flush water to various locations on campus. In addition, Midlands Center has a well located between Sequoia and the Administration Building, which is considered a non-potable water source that can be used for flushing toilets.
- The large heavy-duty trash cans will hold water if they are not rusty on the bottoms. The other large trash cans will be placed at all buildings that are in use. The trash can will be placed under a rain downspout after the downspout has been removed. This is so rainwater will be trapped and not as much water will have to be carried from the swimming pool or other sources to the various locations on campus.

2. Consumer/staff tracking:

a) Consumer accountability/tracking:

- The consumer listing for residential provider roster and census is updated daily to identify all consumers present on facility grounds. This listing is provided to the Facility Administrator's office on a weekly basis and a copy is given to the AOD.
- Consumer accountability/tracking is maintained daily by unit accountability sheets and the unit day book, which tracks the location of all consumers on a 24 hour basis. During hours that consumers are participating in day program activities, an additional accountability is maintained by day program staff.
- During an emergency situation, consumers will be identified by name and unit utilizing wrist bands. These wrist bands will be applied as soon as possible during the emergency situation to ensure identification.
- During an emergency situation, consumer accountability will be taken and compared against this consumer listing roster. The AOD will ensure this accountability is completed by the residential unit.
- If the emergency situation arises during hours that consumers are participating in day program activities, then consumer accountability will be taken and compared against this consumer listing roster. The AOD will ensure this accountability is completed by the appropriate day program staff.
- If the emergency situation requires evacuation, consumer accountability will be taken/documented prior to transport and following arrival at the destination. Documentation will be completed on a copy of unit accountability sheets. The AOD will ensure that this accountability is completed and accurate. Again, this additional accountability will be compared against the consumer listing roster. The evacuation destination will be documented in the AOD and switchboard running log.
- If during the emergency situation, a consumer must be transported to emergency medical facilities for treatment, the Facility Administrator or designee and AOD will be notified of transport. The consumer name and transport location will be documented in the AOD and switchboard running log.

b) On-duty staff tracking:

- Regional Center staff are to wear their work identification badges at all times while on duty. These allow staff to be easily identified at all times.

- Residential daily coverage sheets are maintained by the AOD to document residential staff working in each assigned unit.
- During an emergency situation, department directors/supervisors should complete a roster of all staff on duty in their department.
- During an emergency, the AOD will verify residential staff location and compare this against daily coverage sheets to ensure that all on-duty staff are accounted and present.
- If the emergency situation requires evacuation, staff will accompany consumers and document their name on the copy of the unit accountability sheets and accompany the consumers. The evacuation destination will be documented in the AOD and switchboard running log.
- If during the emergency situation, staff must be transported to emergency medical facilities for treatment, the Facility Administrator or designee and AOD will be notified of transport. The staff's name and transport location will be documented in the AOD and switchboard running log.

3. **Evacuation/sheltering:**

Each of the DDSN Regional Centers maintains a current Memorandum of Agreement for emergency alternative shelter and transportation. In the event of a potential or post disaster, the Facility Administrator or designee will activate the Regional Center's EOC, assess the situation, and consult with the DDSN State Director to determine if evacuation is in the best interest of the facility. Evacuation will occur as ordered by local emergency officials or the Governor of South Carolina. Once a determination has been made, the Facility Administrator or designee will contact the Facility Administrator of the sheltering facility for implementation of the relocation plan.

a) **Transportation plan/vehicles:**

To accomplish the evacuation of consumers and staff to the sheltering facility, on-campus vehicles and the sheltering facility's vehicles have been identified for transport. As soon as authorization is given for evacuation, the following will occur:

- The Facility Administrator or designee will make arrangements with the other Facility Administrator for dispatching of the identified sheltering facility's vehicles. The receiving facility Emergency Plan Coordinator will then notify Transportation Services who will deploy the vehicles in convoys to the evacuating Regional Center. These vehicles will be driven by the identified staff from the sheltering facility.

- The AOD, Residential Service Director, and the Physical Plant Director will dispatch the facility vehicles to the residences. The Program Coordinators, Qualified Intellectual Disability Professionals (QIDPs), and Service Directors will monitor the preparation for transport to the designated sheltering facility. Food services will provide a bag meal specific to the consumers' dietary needs during transport to the sheltering facility. Minimum needs for each consumer will include, but not limited to the consumer record, chrome books for electronic documentation, three days of clothing, medications, personal grooming/hygiene items, and adaptive devices. Consumers and staff will be grouped in vehicles by residence, followed by regrouping to the designated facility. Drivers for the evacuating Regional Center vehicles will be assigned direct and support staff. At the direction of the EOC, the vehicles will be deployed in convoys of three to five vehicles.
- Vehicles utilized from the sheltering facility will check in with the EOC upon arrival to the facility. At the direction of the AOD, these vehicles will be sent to the assigned residences. The Program Coordinators, QIDP's, and Service Directors will monitor the preparation for transport to the designated sheltering facility. Minimum needs for each consumer will include, but not limited to the consumer record, three days of clothing, medications, personal grooming/hygiene items, and adaptive devices. Consumers and staff will be grouped in vehicles by residence followed by regrouping to the designated facility. Drivers for the evacuating Regional Center vehicles will be assigned direct and support staff. At the direction of the EOC, the vehicles will be deployed in convoys of three to five vehicles.
- Box truck type vehicle(s) will be used to transport to each sheltering facility inflatable mattress pads, mattresses, pillows, adult briefs, linens, adaptive equipment, supplements, nonperishable food items, water, and any other supplies identified by the EOC and the sheltering facility.
- The evacuating Regional Center is not relying on individuals or a transport company for relocation needs of identified medically fragile consumers.

COASTAL CENTER

Coastal Center	
7 Passenger, #02	2005 Dodge Van
8 Passenger, #10	2001 Dodge Van
8 Passenger, #18	2001 Dodge Van
8 Passenger, # 19	2001 Dodge Van
7 Passenger, #50	2018 Ford Transit Van
5 Passenger, #60	2007 Chevy Malibu
Emerg. Vehicle, #03	1993 Ford Pickup
Emerg. Vehicle, #07	1996 Ford Van
Emerg. Vehicle, #11	2010 Chevy Pk
Emerg. Vehicle, #44	2006 Dodge Caravan
Shop Vehicle, #17	2017 Ford Pickup
5P-1WC, #45	2015 Dodge Caravan
ADP-4WC, #26	1998 Ford Van
6 Passenger, #46	2009 Dodge Van
6 Passenger, #51	2010 Dodge Van
Box Truck, #23	2016 Ford Box Truck
7 Passenger, #35	2000 Dodge Van
4P-7WC, #56	2009 Goshen Bus
4P-7WC, #57	2009 Goshen Bus
4P-7WC, #58	2009 Goshen Bus
4 Passenger, #36	2017 Chrysler 200

MIDLANDS CENTER

Residence	Vehicle	Driver
Chestnut	*12 passenger van (Chestnut's van) *7 passenger van (Transportation Pool)	*Staff from Chestnut will drive van *Staff from Day Supports will drive/transport Chestnut
Juniper	*7 passenger van (Juniper's van) *7 passenger van (Transportation pool) *7 passenger van (Transportation Pool)	*Staff from Juniper will drive van * Day Supports staff will drive /transport Juniper. Day Supports staff will drive /transport Juniper.
Magnolia	*3 (Buses-Transportation) *1 (Mesquite Bus)	*Transportation staff will drive buses *Staff from Magnolia will drive/transport Magnolia
Palm	*12 passenger van (gym) *12 passenger van (Palm's van) *7 passenger van (Palmetto's van)	*Day Support staff will drive/transport Palm *Palm staff will drive/transport *Palm's staff will drive/transport
Willow	*1 (Magnolia Bus) *1 (Gym Bus) *18 passenger van (workshop)	*Magnolia staff will drive/transport *Staff from Day Supports will drive/transport Willow *Staff from Day Supports will drive/transport Willow

PEE DEE/SALEEBY CENTER

Vehicle #	Tag #	Year	Description	Capacity Pass./WC	Fixed Asset #	VIN#	Mileage	Assigned	# of Staff	# of WC	# of Ind.
6-206	SG63206	1993	4X4	6 Pass	06-005293	2FTJW36MX PCA54021	40,612	Generator Truck	6	0	
6-250	SG270	2001	FORD	16 Pass/Transport	06-005745	1FDWE35L8 1HA91131	47,304	Consumers Transport Van	1	0	16
6-254	SG268	2001	Ford Handicap/	3WC/8Pass SC	06-005754	1FDWE35L9 2HA33580	89,620	Consumers Transport Van SC	1	3	0
6-255	SG311	2001	Ford	14 Pass/Transport	06-005755	1FDWE35L2 2HA33582	64,444	Consumers Transport Van	1	0	14
6-406	SG14129	2016	Ford Transit Van	10 Pass	6005825	1FB2X2XM7 GKA848	11,417	Pee Dee Transport Van	1	0	10
6-408	SG14189	2015	Chevrolet E3500 Box Truck	1 Pass		1GB3G3CG XF1118616	39,790	C Kit Delivery Van	1	0	
6-178	17814SG	2017	Ford Transit Van	10 Pass		1FB2X2XM5 HKB35499	7,000	Pee Dee Switch Board	1	0	10
6-200	20073SG	2018	Dodge	4 Pass	J16605	2C4RDGBG OJ253695	10,180	Pee Dee Transport Van	1	0	5
6-269	SG 537	2009	Ford Handicap/	5WC/or 9 Pass	J16605	1FDEE35L0 9DA21282	51,814	Pee Dee Transport Van	1	6	14
6-270	SG671	2013	Ford Starcraft/	14 Pass or 4WC	J16605	1FDEE3FL4 DDA45236	39,026	Pee Dee Transport Van	1	4	14
6-173	17353SG	2017	Dodge Grand Carvan	7 Pass	J16605	2C4RDGBG 6HR707989	15,311	Saleeby Transport Bus	1	0	7
6-175	17561SG	2017	Dodge Grand Carvan	7 Pass	J16605	2C4RDGBG XHR758878	18,721	Infirmary Van	1	0	7
6-155	SG155	2015	Ford Bus Handicap	4 Pass 4 W/C	Ji6605	1FDEE3FLG DCO3556	23,920	Saleeby Transport Bus	1	4	4
6-157	SG-157	2015	Dodge Amerivan DOT	3 staff 1W/C	J16605	2C7WDGBG 3FK703496	41,845	Pee Dee Medical	1	1	5
6-180	18077SG	2017	Ford Starcraft/	WC 4 Pass 4W/C	J16605	1FDEE3FSX HDC52923	10,887	Saleeby Transport Van	1	4	4
6-201	20181Sg	2019	Ford / Escape		J16605	1FMCUOF78 JUC49755	4,752	Pee Dee Admin	4	0	3
6-484'	20484SG	2019	Ford Truck 250		J16605	1FTBF2A61 KEC12739	2,719	Generator Truck	1	0	2
6-215	21500SG	2018	Dodge		J16605	2C7WDGBG JR203545	913	Saleeby Center	1	1	5

WHITTEN CENTER

(to assist other DDSN Regional Centers)

Vehicle#	Tag#	Year	Description of Vehicle	Pass./WC	Agency ID#	VIN#	Mileage	Assignment	# of Staff	# of Amb.	# of WC	# of Passenger
3-919	SG67001	1998	FORD CLUB WAGEN	Both	03-024855	1FBSS31LXWHC10018	91,252	MOTOR POOL	3	2	3	8
2-350	SG77774	2000	FORD TAURUS	Pass	02-011842	1FAPP5222YA229146	120,710	MOTOR POOL	2	2	0	4
3-955	SG85603	2005	DODGE CARAVAN	Pass	03-025117	1D4GP25E35B427634	170,253	MOTOR POOL	3	4	0	7
3-957	13039SG	2008	CHEVROLET IMPALA	Pass	10-003273	2G1WB58K881287233	62,644	NURSING	2	2	0	4
SG661	SG661	2009	FORD GOSHAN COACH	Both	----	1FDFE45S19DA50131	67,007	TRANSPORTATION	3	2	8	13
SG670	SG670	2013	FORD STARCRAFT	Both	Lease	----	56,370	TRANSPORTATION	3	4	4	11
SG135	SG135	2014	FORD STARCRAFT	Both	Lease	----	47,685	TRANSPORTATION	3	4	4	11
3-958	SG158	2015	DODGE AMERIVAN	Both	10-03767	2C7WDGBG3FR703495	56,344	TRANSPORTATION	3	0	2	5
23376SG	23376SG	2020	NISSAN ROGUE	Pass	Lease	----	481	ADMINISTRATION	2	2	0	4
12391SG	12391SG	2015	FORD BOX TRUCK	Pass	Lease	----	12,103	FOOD SERVICE	2	0	0	2
13650SG	13650SG	2016	DODGE CARAVAN	Pass	Lease	----	44,665	MOTOR POOL	3	4	0	7
13651SG	13651SG	2016	DODGE CARAVAN	Pass	Lease	----	43,131	MOTOR POOL	3	4	0	7
13653SG	13653SG	2016	DODGE CARAVAN	Pass	Lease	----	43,572	MOTOR POOL	3	4	0	7
21319SG	21349SG	2019	FORD ESCAPE	Pass	Lease	----	15,463	DISTRICT I	2	2	0	4
3-959	14130SG	2016	FORD TRANSIT VAN	Pass	03-026272	1FBZX2XM5GKA84830	13,950	MOTOR POOL	3	8	0	11
3-960	17623SG	2017	FORD ESCAPE	Pass	03-026302	1FMCU9GD0HUE24874	21,824	FOD	2	2	0	4
3-961	17815SG	2017	FORD TRANSIT VAN	Pass	03-026305	1FB2X2XM1HKB38450	13,462	ENCLAVE	3	8	0	11
								Total	45	54	21	120

b) Transportation plan/routes:

Evacuation of the facility will be in accordance with state emergency route plans. Primary and secondary routes have been identified (see Appendix D).

c) Sleeping plan:

Upon authorization for relocation, the Facility Administrator or designee will inform the sheltering facility of the number of consumers and staff who will be evacuating. The evacuating Regional Center will have consumers grouped by residence and need to expedite the evacuation and placement. Each sheltering facility will activate their Emergency Preparedness Plan for receiving consumers from other DDSN facilities to include, but not limited to available residences/space, support services, medical triage, etc. Upon arrival to the sheltering facility, each vehicle will check in with the EOC for further instructions.

The sheltering facilities maintain an inventory of portable camper, standard mattresses, and cots. In limited quantities, hospital bed and specialty mattresses are available. The Supply and Services Director and Physical Therapist will contact the respective counterparts prior to the evacuation for the actual count and type of mattresses available. The evacuating Regional Center will supply

the additional quantities and any specialty mattresses unavailable at the sheltering facility.

d) Feeding plan:

The evacuating Regional Center maintains a 6 month diet menu cycle that includes all regular, restrictive, and therapeutic diets for each consumer. Available for each meal and snack are individualized diet slips that include the person's name, the type of diet, portion sizes, and special instructions. When the determination has been made that the facility will evacuate, the Supply and Services Director will forward the information to the sheltering facility in advance via computer or fax, or it will be sent with the vehicle convoys if unable to generate it electronically. The sheltering facility's Dietary and Food Service Department will provide and prepare the food with the assistance of the assigned evacuating Regional Center's food service staff and Food Service Director.

e) Medication plan:

The evacuating Regional Center maintains a medication supply up to 30 days for each consumer. In the event of an evacuation, each person's medication and stock items will be inventoried, packed, properly secured, and transported to the sheltering facility. The Director of Nursing or Nurse Manager will notify the pharmacy of the facility's relocation plans and maintain contact as needed. Consumer medications will continue to be ordered and supply restocked with the delivery to the sheltering facility.

f) Procedures for medical support:

During the evacuation to the sheltering facility, provision of medical support services will be provided by the evacuating Regional Center's medical personnel under the direction of the Medical Director and Director of Nursing. Consumer medications, medical supplies, medical records, and Medication Administration Records (MARs) will be transported to the sheltering facility, and the assigned nurses will administered the medication as ordered by the physician.

g) Staffing plan:

During a disaster with evacuation, it is the evacuating Regional Center's intent to maintain continuity of services for each consumer even under adverse circumstances with no expectation for staffing support from the sheltering site. The evacuating Regional Center's EOC will remain activated during a partial evacuation and maintain a smaller work force on the campus as identified in the

relocation. When a full evacuation has been ordered, the relocation plan will be implemented as identified and the remaining consumers and work force will travel in convoy to the sheltering facility. When local emergency officials or the Governor of South Carolina determine it is safe, the Facility Administrator will order the return of the evacuated Regional Center's staff and consumers.

4. **Medical documentation:**

DDSN Regional Centers utilize the Therap Electronic Documentation System for primary documentation of consumer information and care. Additional paper medical records are also maintained. Information and medical documentation will be maintained by Therap, and paper charts for consumers will be maintained under the facility's care. In the event that the internet is down, Therap paper forms will be utilized to document information and care. Copies of Therap information and medical documentation, along with paper documentation, will be provided to other health care providers to maintain continuity of care. The DDSN Central Office Public Information Officer is responsible for sharing and managing release of information during emergency situations. This includes the general condition and location of consumers under the facility's care.

5. **Volunteers:**

DDSN Regional Centers will utilize existing staff, including professional staff if necessary, to effectively manage all emergency operations and address surge needs during an emergency.

6. **Arrangement with other facilities:** (see Appendix E)

7. **Roles under a waiver declared by the Secretary:**

During declaration of a national emergency, the Secretary of the Department of Health and Human Services may authorize CMS to take proactive steps through emergency waivers and modifications under section 1135 of the Social Security Act. As a result of this authority, CMS may issue blanket waivers of certain requirements and will review other individual waiver requests on a case by case basis to ease certain requirements for impacted providers. If needed, specific waivers may be retroactive to the beginning of the emergency or disaster. The 1135 waiver authority applies only to Federal requirements and does not apply to State requirements for licensure. When a blanket waiver is issued, providers

do not have to apply for an individual waiver. Blanket waivers prevent gaps in access to care for providers affected by the emergency. Individual case by case waivers may be available by submitting a request to 1135waiver@cms.hhs.gov. In the event of a national emergency, DDSN will monitor for blanket waivers issued by CMS at <https://www.cms.gov/medicare/provider-enrollment-and-certification/surveycertificationgeninfo/policy-and-memos-to-states-and-regions.html> and will submit case-specific waiver requests as needed using the following instructions: <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Downloads/What-Information-to-Provide-for-an-1135-Waiver-Request.pdf>.

III. Core Element: Communication Plan

1. Names and contact information:

a) Staff and consumer physicians:

Purpose:

To provide a call system for on duty and recall system of off duty personnel to provide adequate coverage during an emergency or disaster. In the event that any of those listed cannot be contacted, the next senior employee from that work area will be recalled. Additional personnel, as needed, will be recalled based upon circumstances encountered. All employees' immediate supervisor with the authority of the head of the EOC can and will assign employees different work duties during and after a disaster. The contact information for all remaining staff is reviewed and updated as necessary. Electronic or hard copies of contact lists are accessible during emergencies.

COASTAL CENTER

POSITION	NAME	LOCATION	OFFICE	DDSN Mobile #	Home/Mobile
COASTAL CENTER					
Emergency Operations Center	Emergencies	EOC			

POSITION	NAME	LOCATION	OFFICE	DDSN Mobile #	Home/Mobile
Emergency Operations Center	Reporting Status	EOC			
Chief AOD	James Moses	Switchboard		843- 200- 9781	843-453-9506
Day Program Director	Claudette Fields	Centerview			843-767-1716
Dental Dept.	Dr. Gwendolyn Brown	510			843-708-8939
Facility Administrator	Tom McDaniel	B-2 Admin	Administration		843-501-3433
Finance	Lori McCurley	B-2 Admin	Finance Office		843-670-5261
Food Service	Richard Nickless	Food Service Bldg			843-478-6527
Health Nurse/Infection Control	Darlene Moore	510			843-452-8620
Human Resources	John Dooney	B-2 Admin	Human Resources		843-343-7016
I.T.	Scott Rataj	510			843-871-0639
Lead Investigator	Doris Piper	510			843-834-5340
Maintenance	Steve Murray	Maintenance Bldg		843- 217- 3583	843-832-7097
Master Scheduler	Valeria Bryant	510			843-321-7196
Nursing Administrator	Debra Nolan	510			843-744-6087
Physician	Sean Haley				1-315-391- 5958
Physician	Russell Blackwelder				843-323-6988
Procurement Officer	Lynn Murray	B-2 Admin	Finance Office		843-725-9867
Psychology	Michele Zila	D-6			843-813-2221
Quality Assurance	Rochelle Ansah	B-2 Admin	Administration	843- 200- 9783	843-729-7977
QIDP	Ronalda Surin	110			843-532-6016
QIDP	Rainey Ravenell	310			843-452-8232

POSITION	NAME	LOCATION	OFFICE	DDSN Mobile #	Home/Mobile
QIDP	Reeva Ransom	510			843-879-1170
QIDP	Dawn Brown	710			843-810-5583
QIDP	Shaunte Green	810			843-324-2739
QIDP	Katrina Spann-Bennett	910			843-830-7684
QIDP	Crystal Middleton	320/420			843-437-7387
QIDP	Latonia Ladson	520			843-801-2338
QIDP	Catherine Brayford	620			803-707-6814
Records	Delores Ketchens	Switchboard			843-209-4357
Residential Director	Annabell Simmons	510		843-296-1443	843-810-1606
Therapy Programs	Sue Cripps	D-6			843-814-0418
Training Coordinator	Felita Martino	D-6			843-224-3616

MIDLANDS CENTER

POSITION	NAME	LOCATION	OFFICE	DDSN Mobile #	Office#
MIDLANDS CENTER					
Emergency Operations Center (Emergencies)	Betty Bower	Midlands Center	Warehouse	803-518-3797	803-935-6790
Emergency Operations Center (Reporting Status)	Betty Bower	Midlands Center	Warehouse	803-518-3797	803-935-6790
Transportation	Betty Bower	Midlands Center	Warehouse	803-518-3797	803-935-6790
Chief AOD	Jessie Stevenson	Midlands Center	Plaza(OD office)	803-600-4772	803-935-6037
Dental Dept.	Angela Wright	Midlands Center	Administration Building	803-530-1145	803-935-7687
Facility Administrator	Angela Wright	Midlands Center	Administration Building	803-530-1145	803-935-7687
Finance	Brittney Childs	Midlands Center	Administration Building	N/A	803-935-7516

Food Service	Betty Bower	Midlands Center	Warehouse	803-518-3797	803-935-6790
Health Nurse/Infection Control	Pamela Prince	Midlands Center	Oak Building	N/A	803-935-7250
Health Supports	Ricardo Holmes	Midlands Center	Oak Building	N/A	803-935-6780
Human Res	Ashlee Cole-Funn	Midlands Center	Administration Building	N/A	803-935-5208
Maintenance	Jason Branham	Midlands Center	Warehouse	803-429-5662	803-935-6877
Director of Nursing	Rebecca Williams	Midlands Center	Plaza(Nursing Office)	803-543-3725	803-935-6799
Physician	Cedric Rivers	Midlands Center	Oak Building	N/A	803-935-7250
Physician	Mark Ayers	Midlands Center	Oak Building	N/A	803-935-7250
Procurement Officer	Brittney Childs	Midlands Center	Administration Building	N/A	803-935-6877
QA	Sherry Cade	Midlands Center	Administration Building	803-528-4517	803-935-6037
QIDP	Ronnie Rhode	Midlands Center	Chestnut Building	N/A	803-935-7494
QIDP	Benjamin Hamilton	Midlands Center	Juniper Building	N/A	803-935-5905
QIDP	Keisha Taylor	Midlands Center	Magnolia Building	N/A	803-935-7445
QIDP	Cassita Cain	Midlands Center	Mesquite Building	N/A	803-935-7475
QIDP	Teresa Linton	Midlands Center	Palm Building	N/A	803-935-6930
QIDP	Amada Strother	Midlands Center	Palmetto Building	N/A	803-935-6758
QIDP	Qwendolyn Gates	Midlands Center	Sycamore Building	N/A	803-935-6772
QIDP	Juanita McClary	Midlands Center	Willow Building	803-954-9500 (Pager)	803-935-6869
QIDP	Open	Midlands Center	Walnut Building	N/A	Open
Records	Brittney Childs	Midlands Center	Administration Building	N/A	803-935-6877
Residential Administrator	Aniste Gass	Midlands Center	Administration Building	803-600-4843	803-935-7505
Volunteer Services Director	Aniste Gass	Midlands Center	Administration Building	803-600-4843	803-935-7505

Work Activity Director	Renee Riley	Midlands Center	WAC	N/A	803-935-6877
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PEE DEE/SALEEBY CENTER

POSITION	NAME	LOCATION	OFFICE	DDSN Mobile #	Home/Mobile
PEE DEE CENTER					
Emergency Operations Center	Emergencies	EOC	843-664-2710	843-495-0831	
Emergency Operations Center	Reporting Status	EOC	843-664-2750		
Adult Skills	Ms. Timolin Paul	202 Pecan	843-664-2667		
Chief AOD	Mr. McCray	EOC	843-664-2691	843-687-3571	
Dental Dept.	Dr. Tepper	Infirmary	843-664-2634		843-669-1510
Developmental Administrator	Mr. Woods	EOC	843-664-2603		803-459-8944
Facility Administrator	Ms. McLean	EOC	843-664-2635	843-495-3298	843-598-2824
Finance	Ms. Reddick		843-664-2613		
Food Service	Ms. White	Food Serv	843-664-2734		843-269-5991
Health Nurse/Infection Control	Ms. Weeks	PD/Saleeby	843-664-2612		843-615-0354
Health Program	Dr. Steadman	Infirmary		843-495-3295	843-618-9709
Human Res	Ms. McKeever	EOC	843-664-2605		
Maintenance	Mr. Amerson	EOC	843-664-2733		843-230-2575
Nursing Administrator	Ms. Wilson	PD	843-664-2631		843-206-4498
Procurement Officer	Mr. Burns	EOC	843-664-2696		
QA	Mr. Kolesar	EOC	843-664-2624		843-659-7124
QIDP	Vacant	203 Pecan	843-664-2676		

POSITION	NAME	LOCATION	OFFICE	DDSN Mobile #	Home/Mobile
QIDP	Ms. Davis	204 Pecan	843-664-2679		843-665-6133
QIDP	Ms. Lee	205 Pecan	843-664-2670		
QIDP	Ms. Page	301 Mul	843-664-2771		843-665-7892
QIDP	Ms. McNeil	302 Mul	843-664-2772		
QIDP	Ms. Davis	304 Mul	843-664-2774		
QIDP	Mr. Campbell	305 Mul	843-664-2775		843-664-2678
QIDP	Ms. Brathwaite	306 Mul	843-664-2776		
Records	Ms. Booker	Rec/Hkpg	843-664-2637	843-617-7543	843-629-1584
Residential Administrator	Ms. Mack	EOC	843-664-2621		
Volunteer Services Director	Ms. Allen	201 Pecan	843-664-2611	843-229-6662	843-669-6068
Work Activity Director	Ms. Paul	WAC	843-664-2669		

SALEEBY CENTER					
Saleeby Emergency Number	Emergencies			843-495-3299	
Switchboard (Emergency)	Emergencies			843-332-4104	
Maintenance	Mr. Sportelli	EOC	843-857-1926 X121		
Front Office			843-332-4104	843-495-3300	843-992-0424
Nurse Administrator	Ms. Moree		843-857-1929		
Nursing East Wing	Nursing		843-857-1920	843-992-0513	843-621-4916
Physician Center Wing	Physician Phone		843-857-1925	843-992-3755	
Physician East Wing	Physician Phone		843-857-1920	843-992-3761	

POSITION	NAME	LOCATION	OFFICE	DDSN Mobile #	Home/Mobile
Physician West Wing	Physician Phone		843-857-1918	843-992-3757	
Residential Administrator	Mr. Chapman		843-857-1947 X176		
QIDP	Ms. McDaniel		843-857-1944 X171		843-383-6691
QIDP	Ms. Samuel		843-857-1942 X153		843-332-6887
QIDP	Ms. Sifford		843-857-1916 X104		843-332-5774

WHITTEN CENTER

POSITION	NAME	LOCATION	OFFICE #	DDSN Mobile #	Home/Mobile #
WHITTEN CENTER					
Emergency Operations Center	Emergencies	EOC	864-938-3669	N/A	N/A
Emergency Operations Center	Reporting Status	EOC	864-938-3669	N/A	N/A
Adult Skills	N/A	N/A	N/A	N/A	N/A
Chief AOD	JR Mims	Administration Building	864-938-3173	864-938-5080	864-872-0347
Dental Dept.	N/A	Dental Clinic	864-938-3339	N/A	N/A
Developmental Administrator	N/A	N/A	N/A	N/A	N/A
Facility Administrator	Randy Davis	Administration Building	864-938-3422	864-938-5075	864-684-7363
Finance	Keshia Williams	Administration Building	864-938-3342	864-278-3100	864-944-4358

Food Service	Todd Payne	Food Services Building	864-938-3308	N/A	864-684-5001
Health Nurse/Infection Control	Pamela (Starr) Fortenberry	Health Services Building	864-938-3344	N/A	864-419-3798
Health Program	Dr. Anne Owusu	Health Services Building	864-938-3372	864-938-6772	864-923-1218
Human Resources	Alicia Carpenter	Human Resources	864-938-3643	N/A	803-609-8994
Maintenance	James Hill	Maintenance Building	864-938-3548	864-607-0124	864-923-0854
Nursing Administrator	R.B. Williams	Health Services Building	864-938-3334	803-543-3725	803-447-0310
Nursing Manager	Kim Calliham	Health Services Building	864-938-3212	N/A	864-229-9781
Physician	Dr. Anne Owusu	Health Services Building	864-938-3372	864-938-6772	864-923-1218
Physician	Dr. Keith Gatchell	Health Services Building	864-938-3381	N/A	864-923-9731
Procurement Officer	Keshia Williams	Administration Building	864-938-3342	864-278-3100	864-944-4358
Psychology	Mary Ann Weaver	Psychology Building	864-938-3691	N/A	864-923-6028
QA	Abby Gilliam	Administration Building	864-938-3172	N/A	864-684-0082
QIDP	Tanya Priest	Unit 102	864-938-3365	N/A	864-321-7572
QIDP	Carroll Chappell	Unit 105	864-938-3186	N/A	803-402-5242
QIDP	Dawn Shealy	Unit 106	864-938-3228	N/A	803-271-3620
QIDP	Tammy Williams	Unit 107	864-938-3660	N/A	864-923-8054
QIDP	Tina Johnson	Unit 108	864-938-3646	N/A	864-229-0180
QIDP	Janice Pitts	Unit 110	864-938-3659	N/A	864-833-5974
QIDP	Alasia Gary	Unit 201	864-938-3183	N/A	864-200-1071
QIDP	Dee Hall	Unit 201	864-938-3213	N/A	864-682-4255

QIDP	Sallie Simmons	Unit 204	864-938-3284	N/A	864-682-4104
QIDP	Marty Wilbanks	Unit 205	864-938-3205	N/A	803-694-2717
QIDP	Kadi Feliz	Unit 207	864-938-3217	N/A	803-477-0566
Records	Toya Young	Health Services Building	864-938-3441	N/A	864-321-1830
Residential Administrator	Casey Smart	Administration Building	864-938-109	864-938-5077	864-419-0800
Volunteer Services Director	Tara Glenn	Hallett/IST Building	864-938-3332	N/A	864-200-5823
Work Activity Director	Holly Ashworth	Sloan Building	864-938-3513	864-938-5076	864-915-4362

b) Other facilities:

Coastal Center
9995 Miles-Jamison Road
Summerville, SC 29485
843-873-5750

Midlands Center
8301 Farrow Road
Columbia, SC 29203
803-935-7500

Pee Dee Center
714 East National Cemetery Road
Florence, SC 29506
843-664-2600

Thad E. Saleeby
714 Lewellen Avenue
Hartsville, SC 29550
843-332-4104

Whitten Center
28373 Highway 76 East
Clinton, SC 29325
864-833-2733

c) Volunteers

DDSN Regional Centers will utilize existing staff, including professional staff if necessary, to effectively manage all emergency operations and address surge needs during an emergency.

2. **Emergency officials' contact information:**

a) Local emergency preparedness staff: Please note that during an emergency the only number needed for emergency services/responders (fire, police, EMS, Emergency Management) is 911, which will dispatch the proper agencies. Supplemental numbers are provided below as well.

COASTAL CENTER

<u>EMERGENCY PREPAREDNESS AGENCIES</u>	
Dorchester County (Warning Point)	843-873-5111
Charleston County (non-emergency)	843-740-6400
Charleston Southern University Earthquake Center	843-953-5591
Dorchester County Emergency Management Dept.	843-832-0342
EMS:	
Dorchester County	843-873-6111
Charleston County (non-emergency)	843-745-4000
(emergency/call before a drill)	911
Fire departments:	
Old Fort Fire Department	843-873-6111
Summerville Fire Department	843-875-1650
Forest Fire	1-800-777-3473
Gas companies:	
SC Electric and Gas Co. (Natural)	843-851-4900
Hospitals:	
Summerville Medical Center	843-832-5000
Trident Medical Center	843-797-7000
Medical University of S.C. Medical Center	843-792-2300
Bon Secours St. Francis	843-402-1000
Vibra Hospital	843-876-8670
Law enforcement:	
Dorchester Co. Sheriff's Dept.	832-0300 or 873-5111
Highway Patrol	843-953-6010
Dept. of Natural Resource	1-800-922-5431

State Law Enforcement Division (OD)	803-737-9000
Red Cross:	
Carolina Low Country Chapter	843-764-4331
S.C. National Guard:	
Summerville	843-873-4331
N. Charleston	843-552-1033 or 1066

MIDLANDS CENTER

<u>Fire Department:</u>	
Columbia Fire Department	803-545-3700
<u>Hospitals:</u>	
Dorn VA Medical Center	803-776-4000
G. Werber Bryan Psychiatric Hospital	803-935-7143
Lexington Medical Center	803-791-2000
Prisma Health Baptist	803-296-5010
Prisma Health Children's Hospital	803-296-5437
Prisma Health Parkridge	803-907-7000
Prisma Health Richland	803-434-7000
Providence Health	803-256-5300
Providence Health-Northeast	803-865-4500
William S. Hall Psychiatric Institute	803-935-7100
<u>Law Enforcement:</u>	
Columbia Police Department:	803-749-5836
Richland County Sheriff's Department:	803-576-3000
<u>Power Company:</u>	
SC Electric and Gas Co. (Natural):	888-333-4465

PEE DEE/SALEEBY CENTER

In an emergency, the EOC must call Florence or Darlington County Emergency Preparedness Office.

Agencies	
Darlington County EPP	843-398-4450 X4452 4453 843-398-4447-FX
DHEC Bureau of Facilities Oversight	803-545-4370
DHEC Community Care Oversight Division	803-545-4370
DHEC Under 18 reporting	888-722-2580

Emergency Medical Services (EMS)	843-662-8144 843-398-4441
Fire Departments	843-665-3231 843-339-9098 1-800-666-8685
Florence County EPP	843-665-7255 843-662-9939-FX
Hospitals	843-661-3000 843-667-2000 803-792-2300 843-339-2100
Law Enforcement	843-669-3911 843-665-2121 843-395-4501 843-383-3013 843-661-4700 843-661-4767 1-800-922-5431 803-737-9000
Ombudsmans Abuse Prevention	843-669-3911
Protection and Advocacy	866-275-7273
Red Cross	843-662-8121
S.C. National Guard	843-669-7155 843-662-6602 1-800-424-8802
SC Electric and Gas Co. (Natural)	843-662-6366
SLED Abuse Prevention	866-200-6066 / 803-896-7654
Tree Service	843-664-8733

WHITTEN CENTER

City of Clinton Fire Department	864-833-7507
City of Clinton Police	864-833-7512
City of Clinton Utilities	864-833-7520
CSX Transportation Police Dept.	1-800-232-0144
Laurens County Emergency Management	864-984-4731
Laurens County Hospital	864-833-9100
Laurens County Sheriff	864-984-0523

b) SC Department of Health and Environmental Control (DHEC)
 Bureau of Facilities Oversight/Community Care Oversight Division
 301 Gervais Street
 Columbia, SC 29201
 (803) 545-4370
acc-healthreg@dhec.sc.gov

c) Protection & Advocacy (P&A) for People with Disabilities, Inc.
 3710 Landmark Drive
 Suite 208
 Columbia, SC 29204
 Phone (866) 275-7273
info@pandasc.org

3. Primary/alternate means of communication:

- Routine day-to-day types of communication continue to be used to the degree that they survive the disaster and afford adequate communication within the Regional Center and to outside agencies.
- The EOC will be the control center for receiving and directing emergency communications.
- In the event that telephone communications are disrupted, campus radio communications (two-way radios) will be used and coordinated by the EOC.
- Statewide communications are available via the 800 MHz radio. This radio will be used with the evacuation process should this be implemented.

LTS2000 800 MHZ RADIOS

Orange Button Emergency
 Side Button 1 Select
 Side Button 2 Transmit

1-A	Disabilities	800497
1-B	DPS Aiken	800463
1-C	DPS Richland	800431
1-D	DPS Lexington	800439
1-E	DPS Orangeburg/Calhoun	801897
1-F	DPS Dorchester/Berkley	801865
1-G	DPS Charleston	801857
1-H	DPS Newberry/Laurens	800471
1-I	DPS Spartanburg	801313
1-J	DPS Greenville	801305
1-K	DPS Colleton	801873
1-L	DPS Allendale/Hampton	801905
1-M	DPS Darlington/Marlboro/Marion	801849
1-N	DPS Horry/Dillon	801833
1-O	DPS Georgetown/Williamsburg	801841
1-P	DPS Beaufort/Jasper	801881

COASTAL CENTER

EOC	
Public Phone-Switchboard	843-873-5750
Back-up Phone-Switchboard	843-200-9805 (Cell)
Base Station-Switchboard	0
ICC	5107, 5108, 5146, 5390

	5872, 5873, 5874, 5875
Telephone Communications	
Facility Administrator	843-495-0830 (Cell)
Facility Administrator Emergency Line	843-871-7857
Quality Manager	843-200-9783 (Cell)
Chief AOD	843-200-9781 (Cell)
AOD	843-200-9782 (Cell)
Residential Services Director	843-296-1443 (Cell)
Walkie-Talkie Communications	
Chief AOD	Coastal 1 (voice call)
AOD	Coastal 2 (voice call)
Staff Development Trainer	Coastal 3 (voice call)
Ham Radio Communications	
Ham Radio Volunteer (Steve Murray)	K4TCP
Ham Radio Volunteer (Delores Ketchens)	KK4-KCK
Electronic Mail and Facsimile Communications	
Electronic Mail	<u>List Coastal EOC</u>
Facsimile-Administration	843-821-5800
Back-up Facsimile-Administration	843-821-5804
District II Office Communications	
District II Director	843-832-5567
Back-up Phone-District II Director	843-870-3518
Electronic Mail	<u>rbritt@ddsn.sc.gov</u>
Facsimile	843-832-5599
Power Failure Emergency Transfer Trunks for Off-Campus Communications	
Highlands 110 (ext. 5672)	843-873-5754
Highlands 210 (ext. 5661)	843-873-9796
Highlands 510 (ext. 5412)	843-873-5758
Highlands 510-Medical (ext. 5415)	843-873-5753
Switchboard (ext. 5390)	843-873-5750
Coastal Center	
Public Phone (Switchboard)	843-873-5750
Back-up Phone (Switchboard)	843-200-9805 (Cell)
Facility Administrator	843-495-0830 (Cell)
Quality Manager	843-200-9783 (Cell)
Facsimile	843-821-5800
Officer of the Day (AOD)	843-200-9782 (Cell)
Director of Residential Services	843-296-1443 (Cell)
Electronic Mail	List EOC Coastal
District II Office	843-832-5576

Facsimile (District II Office)	843-832-5599
Electronic Mail (District II Office)	rbritt@ddsn.sc.gov
Ham Radio (Steve Murray)	K4TCP
Ham Radio (Delores Ketchens)	KK4KCK
Central Office	
EOC (Command Center)	803-898-9649
Back-Up Emergency Line (EOC)	803-253-7610
Facsimile (Command Center)	803-898-9656
Emergency EOC (Reed Marshall)	803-572-1269
Community Services (District I Director)	864-938-3497
Community Services (District II Director)	843-832-5567
Electronic Mail (Command Center)	EOC@ddsn.sc.gov
Electronic Mail (Joan Cooper)	jcooper@ddsn.sc.gov
Electronic Mail (Reed Marshall)	rmarshall@ddsn.sc.gov
Public Phone (Co switchboard)	803-989-9600
Back-Up Emergency Switchboard	803-253-7610
Ham Radio (Reed Marshall)	KJ4NOC
Midlands Center	
Public Phone (Switchboard)	803-935-7500
Facility Administrator	803-530-1145 (Cell)
Facsimile (Administration)	803-935-7678
Officer of the Day (AOD)	803-600-4772 (Cell)
Admin. Officer of the Day (AOD)	803-518-1873 (Cell)
Director, Residential/Day Supports	803-600-4843 (Cell)
Support Services	803-935-7567
Electronic Mail (Midlands EOC)	List EOC Midlands
Ham Radio (Ricardo Holmes)	KK4RTV

Pee Dee Center	843-664-2600
Public Phone (Switchboard/Pee Dee)	843-332-4104
Public Phone (Switchboard/Saleeby)	843-495-3302 (Cell)
Facility Administrator (Pee Dee)	843-495-3302 (Cell)
AOD Supervisor	843-495-3299 (Cell)
Officer of the Day	843-664-2622
Director of Nursing (Saleeby)	843-495-3298 (Cell)
Facsimile (Pee Dee)	843-664-2656
Facsimile (Saleeby)	843-332-0842
AOD/Residential Director (Saleeby)	843-857-1947
Electronic Mail	List EOC Pee Dee
Ham Radio (Curtis Amerson)	KJ4NNQ
Ham Radio (Jack Kolesar)	N3AJU
Ham Radio (Jim Sportiello)	KK4DGP

Whitten Center	
Public Phone (Switchboard)	864-833-2733
Facility Administrator	864-938-5075 (Cell)
Facsimile	864-938-3115
Officer on Duty (AOD)	864-938-5080
Service Support	864-938-5103 (Cell)
Electronic Mail	List EOC Whitten
District I Office	864-938-3510
Facsimile (District I Office)	864-938-3435
Electronic Mail (District I Office)	nhall@ddsn.sc.gov
Residential Services	864-938-5077 (Cell)
Lead Facility AOD	864-923-6972 (Cell)
Ham Radio (Angela Mars)	KJ4NNZ
Autism – Central Office	
Daniel Davis	803-898-9639
Electronic Mail (Daniel Davis)	ddavis@ddsn.sc.gov
Autism - Piedmont	
Spartanburg	864-594-4907
Spartanburg (Autism Facsimile)	864-594-4923
Autism - Coastal	
Public Phone (Switchboard)	843-832-5561
Facsimile	843-832-5560
Emergency EOC (Shontel Evans)	843-209-9512 (Cell)
Electronic Mail (Shontel Evans)	sevans@ddsn.sc.gov
State Emergency Management Division	
Phone	803-737-8500
Facsimile	803-737-8570
Electronic Mail 1	warning1@emd.sc.gov
Electronic Mail 2	warning2@emd.sc.gov
Electronic Mail (ESF8)	Esf8@emd.sc.gov
Phone (ESF8)	803-737-8508
DHEC (during disaster)	
ESF-8 Leader (Whitney Cofield)	803-898-3709
	803-518-6792
On-Call 24/7	803-622-7259
Facsimile	803-898-3335
Electronic Mail (W. Cofield)	cofieldwg@dhec.sc.gov
OPHP Duty Officer	ophp-duty@dhec.sc.gov
DHEC – State OPHP	
Director of Plans (Dave Harbison)	803-898-2312

	803-403-3562 (Cell)
Electronic mail	harbisonda@dhec.sc.gov
DHEC – Midlands Region OPHP	
Director (Karen Hutto)	803-576-2691
	803-667-1127 (Cell)
Electronic mail	huttokg@dhec.sc.gov
Regional Center Contacts for Video Conferencing Rooms	
Central Office	Confrm 137
	Confrm 180
	Confrm 251
	Confrm 257
Coastal Center	Ccdistrict2confirm
Midlands Center (Annie Drakeford)	Mcadminconference
Pee Dee Center (John Hitchman)	PCABCR1
Saleeby Center (Lisa Hancock)	SCCR1
Whitten Center (Susan Simpson)	wwchapelconfirm
DDSN Help Desk	
Help Desk	803-898-9767
	803-429-0160 (Cell)
Electronic Mail	helpdesk@ddsn.sc.gov

MIDLANDS CENTER

<u>Portable radio systems/mobile phones and users:</u>	
Facility Administrator	803-530-1145
Campus Supervision	803-600-4772
AOD Pool	803-600-4771
Residential Director	803-600-4843
On Call Nurse	803-600-4986
AOD Pool (Res.)	803-518-1873
AOD Pool (Res.)	803-518-3797
HAM Radio (OD Area)	KK4RTV

PEE DEE/SALEEBY CENTER

Two-way Radio Inventory

DEPARTMENT	LOCATION	ASSIGNED TO	S/N	MODEL #
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Residential	PD	205 Pecan	777FWN56 90	P93YQT20A2AA
Residential	PD	301 Mulberry	777FWN56 20	P93YQT20A2AA
Residential	PD	301 Mulberry	777FXLL62 0	P93YQT20A2AA
AOD	PD	Switchboard	777FXLK7 68	P93YQT20A2AA
AOD	PD	AOD's	777FWN56 03	P93YQT20A2AA
AOD	PD	AOD's	777FXZLL 196	P93YQT20G2AA
AOD	PD	AOD's	777FWN57 00	P93YQT20A2AA
AOD	PD	Vehicle Operator	777FWN57 03	P93YQT20A2AA
Medical	PD	Transporter	777FCE270 4	P93YQT20G2AA
Medical	PD	Charge Nurse	777FCA191 0	P93YQT20G2AA
Maintenance	PD		475FYE265 5	P93ZPC90A2AA
Maintenance	PD		475FYE266 2	P93ZPC90A2AA
Maintenance	PD		475FYE265 0	P93ZPC90A2AA
Maintenance	PD		475FYE266 4	P93ZPC90A2AA
Maintenance	PD		475FYE267 8	P93ZPC90A2AA
Maintenance	PD		475FYE265 9	P93ZPC90A2AA
Maintenance	PD		475FYE265 4	P93ZPC90A2AA
Maintenance	PD		475FYE265 3	P93ZPC90A2AA
Maintenance	PD	Knorphe Byrd		

WHITTEN CENTER

Public Phone (Switchboard)	864-833-2733
Facility Administrator	864-938-5075 (Cell)
Facsimile	864-938-3115

Officer on Duty (AOD)	864-938-5080
Service Support	864-938-5103 (Cell)
Electronic Mail	List EOC Whitten
District I Office	864-938-3510
Facsimile (District I Office)	864-938-3435
Electronic Mail (District I Office)	nhall@ddsn.sc.gov
Residential Services	864-938-5077 (Cell)
Lead Facility AOD	864-923-6972 (Cell)
Ham Radio (Angela Mars)	KJ4NNZ

4. Methods for sharing information:

DDSN Regional Centers utilize the Therap Electronic Documentation System for primary documentation of consumer information and care. Additional paper medical records are also maintained. Information and medical documentation will be maintained by Therap, and paper charts for consumers will be maintained under the facility’s care. In the event that the internet is down, Therap paper forms will be utilized to document information and care. Copies of Therap information and medical documentation, along with paper documentation, will be provided to other health care providers to maintain continuity of care. The DDSN Central Office Public Information Officer is responsible for sharing and managing release of information during emergency situations. This includes the general condition and location of consumers under the facility’s care.

5. Sharing information on occupancy/needs:

The Facility Administrator will report information about the facility’s occupancy, needs, and its ability to provide assistance to other facilities to DDSN Central Office, local/regional DHEC public health offices, DHEC Bureau of Facilities Oversight, local and state emergency management agencies, etc. as necessary. This includes reporting the number of consumers currently at the facility receiving treatment and care or the facility’s occupancy percentage, and any shortage of provisions such as food, water, medical supplies, assistance with evacuation and transfers, etc.

6. Family notifications:

A letter and emergency plan fact sheet is sent annually to all consumer families/surrogates with information about the facility’s emergency

preparedness plans and procedures. In the event of an actual emergency situation, the QIDP will contact families/surrogates as soon as possible to inform them of the plan to support consumers during the emergency.

IV. Core Element: Training and Testing Program

1. Staff training: (documentation available upon request)

- Emergency Preparedness training for existing staff will occur initially and at least every 2 years or sooner if policies and procedures are significantly updated
- New hires will receive Emergency Preparedness training during orientation
- All training sessions will include a test to demonstrate staff knowledge
- The facility will conduct multiple disaster drills annually to ensure staff awareness

2. Emergency Procedures by Category:

a) Active shooter

The U.S. Department of Homeland Security defines active shooter as “an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearms and there is no pattern or method to their selection of victims.” Threats of violence against staff or consumers may come from a variety of sources: emotionally disturbed citizens, angered employees, former employees, etc.

1. Should staff have reason to believe that someone has or is brandishing a firearm or is discharging a firearm in their immediate vicinity, they should immediately remove any consumers and themselves from the impacted area while alerting other staff in the vicinity.
2. As soon as possible, staff should dial 911 for local law enforcement assistance.
3. Staff should then call the switchboard notifying them of the emergency situation.
4. If evacuation from the area or building is not possible, staff should put as much distance/obstacles as possible between them and the active shooter.

Shelter-in place process:

- If possible, go to interior rooms without windows and with doors that lock.
 - Close and lock any doors or windows. Draw window coverings closed. Block entry to your hiding area with chairs, tables, desks, cabinets, etc.
 - Turn off the lights
 - Stay away from doors/windows – lay flat on the floor if possible.
 - Keep consumers as quiet as possible.
5. Don't open the door for anyone (not even the "police"). Law enforcement will let themselves in.
6. As a last resort when hiding/sheltering-in-place or escape is no longer an option and lives are in immediate danger, fight back. Act with physical aggression and throw items at the active shooter.

Options:

- 1st Option: AVOID!
RUN away from the threat! DISTANCE=SAFETY
- 2nd Option: DENY!
Only if AVOIDANCE (running) is not an option!
Barricade if necessary! Be creative! Choose a *defensible* position!
- Final Option: DEFEND!
YOU HAVE THE *RIGHT* TO DEFEND YOURSELF AND OTHERS! Fight as if your life depends upon it!!!

When law enforcement arrives:

1. Remain calm and follow the officer(s) instructions after they have entered the room.
2. Immediately raise your hands with fingers spread apart and hands empty. Don't approach the officers until instructed. Redirect consumers away from officers.
3. Avoid pointing, screaming or yelling.
4. Don't interfere with or interrupt officers that are entering/clearing the area.

In an effort to reduce the possibility of unauthorized entry by an individual into a facility building, all buildings will be locked at all times except during drop off/pick up times at Day Program locations.

b) Bomb threat

Bomb threats are most commonly received via phone, but are also made in person, via email, written note, or observation of suspicious items (e.g., bag, package, vehicle, etc.). In the event of an anonymous threat or discovery of a suspicious item, remain calm and notify the AOD immediately.

1. TWO-WAY RADIO COMMUNICATIONS SHOULD NOT BE USED. ALL TWO-WAY RADIOS SHOULD BE TURNED OFF. RADIO SIGNALS HAVE THE POTENTIAL TO DETONATE A BOMB. DO NOT TOUCH, TAMPER WITH, OR MOVE SUSPICIOUS ITEMS.

2. The AOD will notify the area involved to activate evacuation of that building. The staff member in charge will be responsible for evacuation.

3. The AOD will notify the Facility Administrator or designee. The EOC will be activated at the discretion of the Facility Administrator.

4. The switchboard operator will notify the service directors and the director of maintenance.

5. The EOC will notify the local Sheriff's Department.

6. The Sheriff's Department will be in charge and determine the necessary actions.

c) Chemical spill

Chemical spills may pose a threat to facilities due to their proximity to railroads and major highways where these incidents are most likely to occur. In the event of a chemical spill, there may be limited time to take appropriate action.

1. Upon detection or notification of a chemical spill, the Facility Administrator or designee will activate the EOC. An immediate decision will be made by local authorities whether or not to evacuate. If an evacuation is ordered it will be done in accordance with the facility's relocation plan.

2. If evacuation is not indicated, the following action will be taken:

a) Maintenance staff will shut down HVAC systems and ensure controls are set appropriately.

b) Supervisors will take all steps to close doors, windows, and other openings which permit passage of air, and seal with any available material (tape, wet sheets and towels, etc.). Circulatory fans will be shut down and thermostats will be turned to the highest temperature during the summer and the lowest temperature in the winter.

c) Everyone should remain indoors until the EOC releases the campus from the emergency condition.

d) **Earthquake**

An earthquake is a sudden and violent shaking of the ground, sometimes causing great destruction, as a result of movements within the earth's crust. Earthquakes occur with very little or no warning.

1. During the earthquake:

- In the event of a severe earthquake, the Facility Administrator will activate the EOC and declare an emergency situation.
- When an earthquake happens, keep calm. Don't run or panic. Remain where you are. Drop and cover your head so that you will be able to assist others when the shaking stops. As soon as the shaking stops you want to get the people inside the building outside. In most earthquakes there is an aftershock within 1 to 2 minutes after the initial shock. When outside keep everyone away from buildings and walls. After everyone is out of the building go to an open area away from all buildings.
- If you are driving an automobile or van, pull off the road and stop (as soon as possible, and with caution). Remain in the vehicle until the disturbance subsides. When you drive on, watch for hazards created by the earthquake, such as fallen or falling objects, downed electric wires, bridges that have fallen or undermined roadways.

2. After an earthquake:

- Do not enter any damaged buildings until a repair team has placed a sign on the building saying it is safe to enter the building.
- Don't bring lanterns, torches or lighted cigarettes into buildings that have been damaged by a natural disaster, since there may be leaking gas lines or flammable material present.
- Stay away from fallen or damaged electric wires, which may still be dangerous.
- Alert the building custodian to the severity of the situation, the status of all people, and your need for assistance.

e) **Fire**

Fires may occur at any place and time causing damage to life and property. The leading causes of fires are careless smoking, electrical, heating, and cooking equipment. The number one cause of death related to fires is smoke inhalation rather than burns.

Fire prevention:

All fires can and must be prevented to ensure a safe environment for all consumers and staff. At a minimum, the following preventive measures will be taken and the results documented and filed:

- Fire inspection of the entire facility is conducted every month.
- Firefighting equipment is inspected monthly.
- Fire alarm pull system is inspected monthly.
- Fire smoke detectors are inspected monthly.
- Fire evacuation drills are held every three months on each shift.
- Employees will receive training in fire prevention and evacuations during orientation and annually thereafter.

Different classes of fires:

- Class A fires (ordinary combustibles) involve the burning of paper, cloth, plastic, wood, and other ordinary materials.
- Class B fires (flammable liquids) occur when oil, gasoline, grease, paint, and solvents ignite.
- Class C fires (electrical equipment) happen when faulty wiring, overloaded circuits, malfunctioning computers or other electrical equipment start a fire.
- Class D fires (metal) involve combustible metals, such as magnesium, sodium or potassium. These fires are limited to laboratories with these dangerous substances on hand.
- Class K fires (cooking) ignite in kitchens using hot grease and oil to cook food.

Fight or flight?

When a fire occurs the decision whether or not you should fight the fire with a portable fire extinguisher or to simply evacuate must be made. Most small fires can be put out quickly by a well-trained person with a portable fire extinguisher. However, the person voluntarily willing to put out a small fire must understand how to properly use a fire extinguisher and the hazards involved. The most commonly used fire extinguisher is the red ABC extinguisher. They can be used on A, B or C type fires. Another common extinguisher is a silver extinguisher that contains pressurized water. These extinguishers are used for Class A fires only. While Class K fires do involve flammable liquids, please be aware that Class B fire extinguishers (rated for flammable liquids such as petroleum and gases) are not efficient to handle the high-temperature cooking oil and grease fires that occur in kitchens. It is also important to remember that the use of water on cooking oil and grease

fires will only spread the fire since the oil is not absorbed into the water but rather transported by it. Never use water on a fire involving grease or oil. Only Class K fire extinguishers are adequate for Class K fires and should always be close at hand in a commercial kitchen.

Most fire extinguishers operate using the following P.A.S.S. technique:

- PULL the pin
- AIM at base of fire
- SQUEEZE handle
- SWEEP side to side

If the fire re-ignites, repeat the AIM-SQUEEZE-SWEEP steps.

Protocol:

A person discovering a fire should normally follow a six step procedure:

1. People – Remove all people who are in immediate danger of being burned or affected by smoke inhalation.
2. Isolate – Isolate the fire by closing doors to the involved room.
3. Sound Alarm – Activate the fire alarm and notify the switchboard.
4. Smother – In case of a small trash can fire, consider covering it with a blanket or pillow until a proper fire extinguisher can be located and used.
5. Evacuate – Remove everyone from adjoining areas if the fire continues to spread. Evacuation preparation and further fighting includes turning off all lights and unlocking all doors. Doors and windows should be left closed, but unlocked to avoid drafts. Lights off tells firefighters that the room was cleared of people so they can move on to another area to look for anyone left in the building. Also, firefighters can detect a fire in a dark room easier than in a lit room. Unlocked doors and windows allow firefighters quick entry to fight the fire.
6. Close – All natural, propane shut off valves will be closed and all health related gases will be turned off at the cylinder.

The switchboard operator will notify the AOD, Facility Administrator, Service Directors, and Nurse Manager. The Facility Administrator or designee will activate the EOC.

If you are involved in a fire, remember R.A.C.E. to help you respond safely and correctly:

- RESCUE anyone in immediate danger from the fire, if it does not endanger your life.

- ALARM – sound the alarm by activating a pull station alarm box.
- CONFINE the fire by closing all doors and windows.
- EXTINGUISH the fire with a fire extinguisher, or EVACUATE the area if the fire is too large for a fire extinguisher.

Fire Watch Procedures

NFPA 101-3.3.91 Fire Watch. The assignment of a person or persons to an area for the express purpose of notifying the fire department, the building occupants, or both of an emergency; preventing a fire from occurring; extinguishing small fires; or protecting the public from fire or life safety dangers.

1. Fire alarm system

NFPA 101-9.6.1.6 Where a required fire alarm system is out of service for more than 4 hours in a 24-hour period, the authority having jurisdiction shall be notified, and the building shall be evacuated, or an approved fire watch shall be provided for all parties left unprotected by the shutdown until the fire alarm system has been returned to service.

2. Sprinkler system

NFPA 101-15.5.2 The following procedures shall be implemented: (1) The extent and expected duration of the impairment have been determined. (2) The areas or buildings involved have been inspected and the increased risks determined. (3) Recommendations have been submitted to management or the property owner or designated representative. (4) Where a required fire protection system is out of service for more than 10 hours in a 24-hour period, arrange for one of the following: (a) Evacuation of the building or portion of the building affected by the system out of service (b) An approved fire watch (c) Establishment of a temporary water supply (d) Establishment and implementation of an approved program to eliminate potential ignition sources and limit the amount of fuel available to the fire. (5) The fire department has been notified. (6) The insurance carrier, the alarm company, property owner or designated representative, and other authorities having jurisdiction have been notified. (7) The supervisors in the areas to be affected have been notified.

The Fire Watch Shall:

- Continually patrol the area, structure or facility and document the patrol a minimum of once every hour.
- Be trained in the use of a fire extinguisher and have one accessible at all times.

- Be capable of communicating with building occupants and the fire department to notify them about fires or other emergencies.
- Maintain a record of the Fire Watch for inspection by the Authority Having Jurisdiction.

Fire watch notification should be made to firewatch@dhec.sc.gov during any impairment to these systems whenever they are out of service for the length of time specified above. This email notification alerts all relevant DHEC Health Regulation staff. An additional email notification must be sent when the fire watch ends.

f) Flooding

It is possible that extended periods of heavy rains may be experienced within the state or adjacent counties, which could cause local flooding conditions.

1. In the event that a general flood or flash flood does occur, the EOC will be activated immediately to receive condition reports and give directions accordingly.

2. If general flooding conditions are encountered, there should be sufficient warning through weather services and commercial radio broadcasts to initiate personnel recall and activate the EOC. Should evacuation be required, the facility will make preparations as indicated in the relocation plan.

3. If evacuation is not indicated, food services will make preparations to issue water and food items that do not require heating. Maintenance staff will shut off the water main and ensure all electrical equipment/appliances are unplugged in threatened buildings. Consideration should be given to getting stored items off the floor wherever possible.

g) Hurricane

When the maximum sustained winds of a tropical storm reach 74 miles per hour, it's called a hurricane. Hurricane season begins on June 1 and ends on November 30, but these powerful storms can occur before and after the official season. Hurricanes and tropical storms not only threaten South Carolina's coast but ALL areas of the state. High winds could potentially reach far inland, and flooding is the major threat for people living inland. Because outside preparedness activities become difficult once winds reach tropical storm force, the National Hurricane Center issues watches and warnings for specific areas of danger. Additional watches and warnings may be issued by local National Weather Service offices to provide detailed information on specific threats such as flash floods, floods, and tornadoes.

1. If the probability of a hurricane passing through our area is high, the switchboard operator will monitor the weather alert radio and television advisory bulletins and will keep the Facility Administrator and AOD advised of the status.
2. If a hurricane warning is issued, the Facility Administrator or AOD will activate the EOC and declare an emergency situation.
3. Supervisors and available staff will check, remove, and secure outside objects that have the potential of becoming projectiles/missiles if blown about by high winds. Hurricane panels will be deployed to cover windows (Coastal Center only). Inside, curtains and blinds will be closed and loose sharp objects secured. Move consumer records/files to a central location in the residence.
4. Relocate to a central location in the building keeping away from windows, doors, skylights, and appliances. Blankets will be provided for covering.
5. During the storm, stay in place and remain calm.
6. Alert the EOC to the severity of the situation, the status of everyone in the building, and the need for assistance at least every hour until instructed otherwise.

Hurricane emergency checklist for EOC:

- Monitor weather conditions for any changes.
- Ensure buildings and grounds are properly secured.
- Deploy hurricane panels (Coastal Center only).
- Ensure vehicles have full tanks of gasoline.
- Check flashlights, emergency cooking supplies, generators, natural gas, electric, propane, and oxygen tanks.
- Ensure potable water.
- Distribute emergency first aid buckets and blankets.
- Assemble tools necessary for emergency repairs.
- Inventory disaster supplies and equipment.
- Ensure adequate supply of consumer medications.
- Ensure file records are properly secured.

Hurricane websites:

National Hurricane Center
National Weather Service
SC Emergency Management
FEMA

<http://www.nhc.noaa.gov/>
<http://www.nws.noaa.gov/>
<http://www.scemd.org>
<http://www.fema.gov>

h) Missing consumer

Consumer elopement is defined as a consumer leaving and being absent from the site of service delivery beyond the time frames established in the consumer's individualized accountability plan and supervisory level (see DDSN Directives 100-10-DD, "Consumer Elopement"

<https://ddsn.sc.gov/sites/default/files/Documents/Quality%20Management/Current%20Directives/100-10-DD-Revised%28021816%29.pdf> and 510-01-DD, "Supervision of People Receiving Services"

<https://ddsn.sc.gov/sites/default/files/Documents/Quality%20Management/Current%20Directives/510-01-DD%20-%20Revised%20%28083117%29.pdf>).

1. Whenever a consumer cannot be located in the appropriate program area or unit, the unit supervisor/in-charge will notify the AOD and a search of the immediate area will be initiated. The AOD will proceed to the area where the consumer was last seen to gather information as to the time/place the consumer was last seen, the clothing the consumer was wearing, and past history of elopement by the consumer.
2. The AOD will immediately assign staff to monitor all gates on the campus.
3. After determining that the consumer is not in the immediate area, the switchboard operator will notify the AOD, the Facility Administrator, and the QIDP. The Facility Administrator or designee will inform the Director of Regional Center Operations. The QIDP will notify the family/surrogate as soon as possible, but no later than one hour after the consumer is determined to be missing or known to have eloped.
4. ALL vehicles and dumpsters on campus will be checked by staff assigned by the AOD or Facility Administrator/designee.
5. The AOD or Facility Administrator/designee will notify law enforcement agencies no later than one hour after the consumer has been discovered missing or has eloped. Earlier notification of law enforcement should be carried out when the consumer poses a significant threat to self or others.

Search Protocol:

1. The search for the missing/eloped consumer will be coordinated by the AOD or Facility Administrator/designee.

2. A sufficient number of staff should be involved in the search to facilitate rapid location of the consumer without jeopardizing the support provided to other consumers. If more staff are needed to assist in the search, then the switchboard operator will be notified to call either on/off-duty supervisors, support staff (maintenance, housekeeping, clerical, etc.), QIDPs, Department Managers and/or Executive staff to report and assist in the search.

3. If the consumer is not located in the initial sweep of the immediate area, a complete description of the missing consumer will be made available for search teams, law enforcement and/or first responders that may be participating in the search effort.

4. Search teams will be established with a team captain appointed for each search team. Each search team captain should be available by cell phone or radio.

5. The Search Coordinator will assign search teams to specific areas of the campus. Search team captains working with their teams will verify that their assigned area has been thoroughly searched before moving on to the next assigned area. A thorough search will include:

- Inspecting each room, closet, and utility area of a building
- Opening all locked doors to search the area behind the door
- Looking under beds, behind furniture, and any area that could be a potential hiding place
- Inspecting the exterior grounds around the building
- Search team captains will notify the Search Coordinator by cell phone or radio after they have completed the search of a specific area, and the Search Coordinator will direct the search team to the next area to be searched

Consumer Return:

1. Once the consumer has been located, prompt notification will be made to staff and family. The AOD will ensure that the Facility Administrator and local law enforcement (if contacted) is notified when the consumer is located.

2. Immediately upon the consumer's return, a body check will be completed by nursing staff and treatment will be given for any injuries found. The body check and any treatment will be documented by nursing.

3. The AOD and Facility Administrator or designee will determine what immediate actions need to be taken to ensure the consumer's safety to include increasing the consumer's accountability level.
4. The QIDP will conduct a Called Team Meeting within 24 hours or the next business day to determine steps necessary to prevent recurrence of elopement.
5. A meeting will be held the next working day by the AOD and Facility Administrator or designee to review the conduct of the search and any management problems indicated, and make any necessary improvements to the procedures.

i) Nuclear accident-Robinson Plant (Hartsville)

A nuclear accident is an accident involving a nuclear power plant, perhaps with an escape of harmful radioactivity.

1. In the event of a nuclear emergency, the charge person at Saleeby will notify the AOD of the magnitude of the emergency. Action taken will be based on guidance from the Darlington County Emergency Preparedness Agency through local radio or Television Emergency Alert System (TV EAS).
2. If taking shelter-in-place is the best thing to do because air containing radioactive material is passing over your area, follow these steps:
 - Go indoors and close all windows and doors. Turn off fans, heating, and air-conditioning that require outside air. Close any other air intakes.
 - Do not use your telephone unless absolutely necessary.
 - Cover all open food containers. The food, water, and milk supplies in your home are safe to eat and drink.
 - Go to a room or basement with few or no windows to avoid drafts.
 - Stay tuned to a radio or TV EAS station for emergency information.
 - Stay indoors until a radio or TV EAS station reports that it is safe to go out.
 - Place a cloth over your nose and mouth if you must go out.
3. In the event you must evacuate, follow these steps:
 - Evacuate based on Darlington County Emergency Preparedness Agency guidelines.
 - Follow campus evacuation guidelines. Saleeby will evacuate to the main campus in Florence.
 - Transport all medically required individual needs such as medications.

- The EOC will coordinate services to individuals upon arrival on campus.
- It will be the responsibility of Saleeby Administration to maintain special assistance status with the Darlington County Emergency Preparedness Agency.
- It will also be the responsibility of the Facility Administrator to maintain emergency and evacuation procedures published by Carolina Power & Light in all key areas of the facility.

j) Pandemic

Pandemic is associated with a global disease outbreak for which there is little or no immunity in the human population. The effects are serious with hospitalizations and mortality possibly widespread. The duration of a pandemic is uncertain but could last for an extended period of time. Social disruption may be widespread as usual services may be reduced or cancelled altogether. In the event of a pandemic, Regional Center facilities will procure extra Personal Protective Equipment (PPE) including gloves, gowns, masks, hand sanitizer, sanitizing wipes, etc. In addition, the facilities will follow all guidelines from local, state, and federal officials to include the Centers for Disease Control (CDC), CMS, and DHEC.

The [Personal Protective Equipment \(PPE\) Burn Rate Calculator](#) is a spreadsheet-based model that will help healthcare facilities plan and optimize the use of PPE. To use the calculator, enter the number of full boxes of each type of PPE in stock (e.g., gloves, gowns, surgical masks, etc.) and the total number of consumers at your facility. The tool will calculate the average consumption rate, also referred to as a “burn rate,” for each type of PPE entered in the spreadsheet. This information can then be used to estimate how long the remaining supply of PPE will last, based on the average consumption rate.

The following process outlines procedures to ensure the health and safety of all consumers and employees is maintained. This process can be altered at any time if the risks, contagion, and/or state or federal regulations change.

1. General information and requirements:

- All employees, consumers, and family members/guardians will be provided educational information regarding the illness and measures to reduce the risk of exposure.
- All visitors and service providers will be screened for signs and symptoms of the illness before entering campus (See Attachment A for screening checklist). This checklist will be modified as needed. Campuses will designate one entry way onto campus to ensure everyone entering is thoroughly screened prior to entry. This documentation will be kept on file. Positive responses to the checklist will be assessed by the infection control nurse, and employees will be placed on sick leave and asked to follow up as needed with the telehealth screening process.
- Staff with potential exposures will remain out of work and will be reviewed daily by the infection control nurse until deemed safe to return to work.
- The facility reserves the right to restrict visitation and programming as the risk of exposure rises. Families will be provided written notification in the event of closures or restrictions.
- All staff will continue to use universal precautions and monitor for signs and symptoms of the illness.

2. Care guidelines for a consumer presenting with respiratory symptoms (e.g., cough, fever, generalized ill appearance, etc.):

- The consumer will be isolated to his/her room. Medical providers will be notified and orders obtained for needed screening. If unable to maintain isolation, the consumer will be placed in a mask to reduce droplet precaution throughout the building.
- One staff will act as the primary care giver for the suspected consumer. A primary staff and a relief will be identified for the symptomatic consumer. A mask and gown will be provided for use throughout the entire shift. Brown bags will be provided for masks so they can be reused on following shifts if not visibly soiled. These staff will continue to provide care for these consumers on subsequent shifts as a measure to reduce primary exposure.

- The entire building will be placed on restriction until test results are confirmed. Precautions will be taken to limit staff and nurses from other areas into this dorm.
- All staff and consumers in the identified area will begin temperature and symptom checks. As symptoms appear, these consumers will be placed on isolation and testing will begin. Staff identified with symptoms will be sent home and testing will be recommended.
- All deliveries will be dropped off outside the dorm and will be brought into the dorm by building staff.
- Tables, door knobs, light switches, and frequently used surfaces will be sanitized before meals and after use.
- Staff will be allowed to return home at shift change but will be encouraged to practice social distancing and preventive measures to reduce outside exposure.
- This isolation/restriction will continue until negative test results are received and the consumer is afebrile for 72 hours without fever-reducing medication.

3. Care guidelines for a consumer who tests positive:

- All restrictions for the (+) respiratory illness will apply with the following additions:
- Positive consumer will be placed and will remain in an isolated area.
- Entire building is quarantined. Emergency services will only be provided. In dorm programming will be placed on hold and all available staff will be used as direct care support.
- A gown and mask will be provided for all staff to be used throughout the shift. A brown bag will be provided to place mask in for use on following shifts.
- An isolated changing area will be provided on the outside of the quarantined room to allow for donning and removing PPE. A plastic sheeting will be placed over the outside of the door as an extra barrier for droplets. This sheeting will allow pass through of the employee but will serve as an extra layer of protection.
- A N95 mask will be provided to the staff assigned to the positive consumer. The staff will remove the gown and N95 after being in

the room with the positive consumer and will hang it in the identified location to be reused upon reentry into the room. A surgical mask and gown will be used while not in the room. The surgical mask will be worn under the N95, which will be removed after exiting the positive room. The surgical mask will remain in place throughout the shift. Initially, one N95 mask, one surgical mask, and two gowns will be provided for the staff assigned to the positive consumer. If additional PPE is successfully acquired, these limitations will not be necessary.

- All consumers will be kept in their rooms as much as possible to prevent exposure.
- The positive consumer will have a designated bathroom or bedside commode available. Disposable trays will be provided for meals unless otherwise indicated. Any necessary adaptive dining equipment will be placed in a plastic bag after use and washed/sanitized separately for next use. Linens and trash will be tied up before exiting the dorm and placed outside the dorm for disposal/pickup. A sanitizing station will be set up outside the door for staff to use upon exiting the room.
- 12 hours shifts will be initiated. Staff will be afforded the opportunity to shower and change clothes in a designated area before leaving campus. Instructions will be provided to limit exposure with others. They will be expected to return to work on their next assigned shift unless symptomatic.
- If multiple dorms/areas have positive consumers, the entire campus will be placed on quarantine. At that point, the guidance and directives of SC DDSN and DHEC will be followed.

4. Guidelines for discontinuing isolation of positive consumer:

- At least 3 days (72 hours) have passed since the resolution of fever without the use of fever-reducing medication *and*
- Respiratory symptoms have improved (e.g., cough, shortness of breath) *and*
- At least 10 days have passed since the first symptoms appeared.

Attachment A

HEALTH AND SAFETY CHECKLIST

Employee/ Visitor Name: _____ Date: _____

Reviewer Name: _____ Temp: _____

	QUESTIONNAIRE	Yes	No
1)	Does the employee/visitor have any outward signs of illness?	<input type="checkbox"/>	<input type="checkbox"/>
2)	Have they travelled outside of the United States in the last 14 days?	<input type="checkbox"/>	<input type="checkbox"/>
3)	Have they had close contact with anyone that has traveled outside of the US?	<input type="checkbox"/>	<input type="checkbox"/>
4)	Have they visited a hospital, emergency room, or urgent care in the last 14 days due to an illness?	<input type="checkbox"/>	<input type="checkbox"/>
5)	Have they had contact with anyone with a confirmed case of this disease or that is being investigated?	<input type="checkbox"/>	<input type="checkbox"/>
6)	Have they been in contact with anyone with a respiratory illness?	<input type="checkbox"/>	<input type="checkbox"/>
7)	Do they live in a community where this disease is spreading rapidly?	<input type="checkbox"/>	<input type="checkbox"/>
8)	Ask employee/visitor for response: Do you have any of these symptoms?	<input type="checkbox"/>	<input type="checkbox"/>
	A)	<input type="checkbox"/>	<input type="checkbox"/>
	B)	<input type="checkbox"/>	<input type="checkbox"/>
	C)	<input type="checkbox"/>	<input type="checkbox"/>
	D)	<input type="checkbox"/>	<input type="checkbox"/>

- **If the answer is YES to any of the above AND the employee/visitor is experiencing symptoms or generally appears ill, please send the employee/visitor to the designated area to have temperature checked.**

k) Severe storms

Thunderstorms, hail, high winds, and heavy rain can develop quickly and threaten life and property.

1. In the event of an official severe weather watch, the switchboard operator will monitor the weather alert radio and television advisory bulletins and will keep the Facility Administrator and AOD advised of the

status. All staff will continue assigned duties and monitor weather conditions.

2. When an official severe weather watch is declared, the AOD may declare a severe weather schedule for the entire campus. Consumers and assigned staff will return to the residences and programs will resume.

3. If weather conditions deteriorate, the AOD may declare a high risk watch and all employees, except program staff in the severe weather schedule, will return to their assigned work area and prepare for a severe weather warning.

4. Supervisors and available staff will check, remove, and secure any outside objects that have the potential of becoming projectiles/missiles if blown about by high winds. Inside, curtains and blinds will be closed; computers turned off; and loose sharp objects secured.

5. Relocate to inner areas of the building as soon as possible, keeping away from glass windows, doors, skylights, and appliances.

6. Refrain from using phones, taking showers, washing clothes or dishes, etc.

1) **Tornado**

A tornado is a violent destructive wind accompanied by a funnel-shaped cloud that advances beneath a large storm system in a narrow path over land.

1. In the event of an official tornado watch, the switchboard operator will monitor the weather alert radio and television advisory bulletins and will keep the Facility Administrator and AOD advised of the status. All staff will continue assigned duties and monitor weather conditions.

2. When an official tornado watch is declared, the AOD may declare a severe weather schedule for the entire campus. Consumers and assigned staff will return to the residences and programs will resume.

3. If weather conditions deteriorate, the AOD may declare a high risk watch and all employees, except program staff in the severe weather schedule, will return to their assigned work area and prepare for a tornado warning.

4. Supervisors and available staff will check, remove, and secure any outside objects that have the potential of becoming projectiles/missiles if blown

about by high winds. Inside, curtains and blinds will be closed and loose sharp objects secured. Ensure emergency supplies, medications, and files can be reached quickly.

5. When a tornado warning is broadcasted, the Facility Administrator will activate the EOC and declare an emergency situation.
6. Relocate to inner areas of the building as soon as possible, keeping away from glass windows, doors, skylights and appliances. Provide each person with a blanket, pillows or mattress to protect head/body if possible. Get down on the floor facing the wall and cover face and head to protect from flying glass and debris.
7. After a tornado has passed, alert the EOC of the status of people and property, and if emergency care is needed.

m) **Winter storms**

A winter storm is an event in which varieties of precipitation are formed that only occur at low temperatures, such as snow or sleet, or a rainstorm where ground temperatures are low enough to allow ice to form (i.e., freezing rain).

1. When the probability of a snow or ice storm has been announced by local weather services, the AOD and switchboard operator will monitor the weather service radio station.
2. If it appears the snow or ice storm is imminent, the Facility Administrator will activate the EOC and declare an emergency situation. If the storm occurs after 5:00 PM and before 8:30 AM on weekdays or on weekends, the service directors will return to the facility.
3. Service directors will arrange for necessary staff to return to the facility to ensure continuity of essential support services.
4. Food service staff will prepare and deliver food for consumers and staff.
5. Medical and nursing staff will be present on the grounds of the facility at all times during the storm.
6. State owned vehicles may be used to transport staff to and from work during the storm. Any staff transported should be prepared to stay on duty for 24 hours with the understanding that the immediate supervisor will schedule “sleep time” on the job.

3. **Testing program**: (documentation available upon request)

- a) Full-scale community-based exercise or facility-based functional exercise
- b) Second full-scale community-based exercise, facility-based functional exercise, mock disaster drill or tabletop exercise

(NOTE: If the facility experiences an actual natural or man-made emergency that requires activation of the emergency plan, the facility is exempt from engaging in its next required full-scale community-based or individual, facility-based functional exercise following the onset on the emergency event.)

➤ Appendix A (All-hazards risk assessment):

COASTAL CENTER

EVENT	PROBABILITY				RISK					PREPAREDNESS			TOTAL	
	HIGH	MEDIUM	LOW	NONE	LIFE THREAT	HEALTH/SAFETY	HIGH DISRUPTION	MODERATE DISRUPTION	LOW DISRUPTION	POOR	FAIR	GOOD		
NATURAL EVENTS	SCORE	3	2	1	0	5	4	3	2	1	3	2	1	
Blizzard					X						X			3
Earthquake		X				X	X	X			X	X		17
Epidemic/Pandemic		X				X	X	X			X	X		18
Fire Protection System			X			X	X				X			14
Flood - External								X			X			7
High Winds		X							X		X	X		7
Hurricane		X				X	X				X	X		17
Ice Storm							X	X						17
Landslide					X						X			0
Severe Thunderstorm			X				X	X			X	X		11
Snow Fall				X			X	X			X	X		6
Temperature Extremes				X					X			X		3
Tornado			X			X		X			X			12
Wild Fire					X			X			X			0
HUMAN EVENTS														
Active Shooter			X			X		X			X			13
Civil Disturbance				X				X			X			5
Elopement			X			X	X	X			X	X		15
Explosion			X			X	X	X			X	X		18
Hazardous Material Incident				X		X	X	X			X	X		8
Hostage Situation				X		X	X	X			X	X		12
Supply Chain Failure				X		X	X	X			X			4
Terrorism				X		X	X	X			X			12
Transportation Accident			X			X	X	X			X			8
Work Place Violence				X		X	X	X			X			10
TECHNOLOGICAL EVENTS														
Communications Failure				X				X			X			8
Fire Protection System			X			X		X			X			8
Fuel Shortage			X			X		X		X				3
HVAC Failure			X			X		X			X			10
Power Failure			X			X		X			X			4
Water Failure			X			X		X			X			5

MIDLANDS CENTER

EVENT	HAZARD VULNERABILITY ASSESSMENT										TOTAL			
	PROBABILITY				RISK				PREPAREDNESS					
	HIGH	MEDIUM	LOW	NONE	LIFE THREAT	HEALTH/SAFETY	HIGH DISRUPTION	MODERATE DISRUPTION	LOW DISRUPTION	POOR	FAIR	GOOD		
NATURAL EVENTS	SCORE	3	2	1	0	5	4	3	2	1	3	2	1	
Blizzard				✓							✓			8
Earthquake				✓		✓					✓			7
Epidemic/Pandemic	✓				✓							✓		9
Fire Protection System			✓				✓							6
Flood - External				✓								✓		7
High Winds				✓								✓		8
Hurricane			✓			✓					✓			9
Ice Storm			✓			✓						✓		8
Landslide				✓							✓			9
Severe Thunderstorm	✓				✓		✓					✓		9
Snow Fall		✓						✓				✓		7
Temperature Extremes		✓	✓		✓							✓		10
Tornado			✓		✓							✓		10
Wild Fire				✓		✓					✓			9
HUMAN EVENTS														
Active Shooter				✓		✓					✓			9
Civil Disturbance			✓		✓						✓			7
Elopement			✓			✓					✓			9
Explosion			✓		✓						✓			9
Hazardous Material Incident			✓		✓						✓			8
Hostage Situation			✓		✓						✓			9
Supply Chain Failure			✓		✓						✓			7
Terrorism			✓		✓						✓			9
Transportation Accident			✓		✓						✓			8
Work Place Violence			✓		✓						✓			8
TECHNOLOGICAL EVENTS														
Communications Failure			✓								✓			8
Fire Protection System			✓								✓			6
Fuel Shortage			✓								✓			7
HVAC Failure			✓								✓			7
Power Failure			✓								✓			7
Water Failure			✓								✓			8
			✓								✓			6

PEE DEE/SALEEBY CENTER

PART III-G Community Risk Assessment

Community Risk Assessment Tool

Pee Dee Regional Center

The purpose of this assessment is to identify hazards or vulnerabilities within the Florence and Hartsville communities that require advance planning and inclusion in the agencies comprehensive emergency management program.

Risk = Probability x Impact

Risk is defined as the product of **probability** of the hazard and its potential **impact**.

Probability may be expressed as the likelihood of an event occurring within a given time period; for example, the probability of event x occurring at a given location in the next year is y. Table 1 quantifies probability for a given event to assist in calculating risk.

Issues to consider for probability include, but are not limited to:

1. known factors
2. historical data
3. [statistics](#) from industry, other geographical areas, etc.

Table 1

Probability Rating	Description	Detail
A	Highly Likely	nearly 100% probability in next year
B	Likely	between 10 and 100% probability in next year, or at least one chance in 10 years
C	Possible	between 1 and 10% probability in next year, or at least one chance in next 100 years
D	Unlikely	less than 1% probability in next 100 years

Impact

For the purpose of this hazard assessment, the **impact** should be assessed along three aspects of how the hazard being considered will affect the ability of the provider to deliver an appropriate level of service: **the human impact, the property impact and the business impact**.

The **Overall Impact Rating** then gives a picture of the effect on the Facility in the context of the on-site care and broader community. For example, the hazard may directly impact the staff, clients or the infrastructure that is critical for service delivery. In addition the hazard may result in illness or injury in the community and increased patient loads; if healthcare facilities need to be evacuated, the entire healthcare system may be impacted. An event such as a labor disruption, or a power failure may directly limit a provider's ability to deliver services while not directly impacting the rest of the region. Most events will impact both the facility and the community or region to varying degrees. The overall impact rating evaluates the potential hazard's impacts on the ability of the facility to deliver services.

The rating given for **human impact** should consider whether the hazard has/is:

1. unlikely to cause injury, illness or death in staff or patients
2. low probability of injury, illness or death in staff or patients
3. high probability of injury or illness in staff or patients; low probability of death
4. high probability of death in staff or patients

The rating given for **property impact** should consider whether the hazard is/will cause:

1. unlikely to cause physical plant or equipment damage requiring any replacement costs or recovery time
2. minor physical plant or equipment damage requiring some replacement costs or recovery time
3. moderate physical plant or equipment damage requiring moderate replacement costs or recovery time
4. extensive physical plant or equipment damage with high replacement costs and recovery time

The rating given for **business impact** should consider whether the hazard is/will cause:

1. unlikely to cause service interruption or damage to public image of the institution
2. minor or limited service interruption or damage to public image of the institution
3. moderate service interruption or damage to public image of the institution
4. significant/widespread service interruption or damage to public image of the institution

Table 2

The **Overall Impact Rating** is the sum of the three impact factors for each hazard:

4	Marginal	Normal level of functioning or increased level of service required
5-7	Serious	Facility can provide a normal level of service with assistance from within region or within local community; or, facility can provide a reduced level of service with normal resources
8-10	Critical	Facility can provide a normal level of services with assistance from outside the local community or region; or, facility can provide a minimal level of service with normal resources
11-12	Catastrophic	Facility cannot provide services without extensive assistance from provincial or federal resources

Combining the **Impact Rating** with the **Probability Rating** determines the **Risk**, as outlined in Table 3.

Table 3: Risk Rating ²

Impact Rating \ Probability Rating	A Highly Likely	B Likely	C Possible	D Unlikely
	11-12: Catastrophic	A11-A12	B11-B12	C11-C12
8-10: Critical	A8-A10	B8-B10	C8-C10	D8-D10
5-7: Serious	A5-A7	B5-B7	C5-C7	D5-D7
4: Marginal	A4	B4	C4	D4



Using Table 3, planning may proceed with those events prioritized at the highest risk.

**Pee Dee Center Hazard Risk Analysis Tool Naturally
Occurring Events**

Event	Probability	Human Impact	Property Impact	Business Impact	Overall Impact Rating	Risk Rating
	A, B, C, or D (Table 1)	1, 2, 3, or 4	1, 2, 3, or 4	1, 2, 3, or 4	4-12 (Table 2)	(Table 3)
Hurricane	B	2	3	3	8 (Critical)	High
Severe thunderstorm	A	2	2	2	6 (Serious)	Moderate
Tornado	B	2	4	4	10 (Critical)	High
Blizzard	C	1	2	2	5 (Serious)	Moderate
Extreme Heat	A	2	1	2	5 (Serious)	Moderate
Extreme Cold	B	1	1	2	4 (Marginal)	Low
Ice Storm	B	2	3	3	8 (Critical)	High
Earthquake	C	2	3	4	9 (Critical)	Moderate
Fire - External	C	2	3	3	8 (Critical)	Moderate
Flood – External	B	1	3	3	7 (Serious)	Moderate
Epidemic (Pandemic)	B	3	1	3	7 (Serious)	Moderate

Pee Dee Center Hazard Risk Analysis Tool Technological / Infrastructure Events Internal/External)						
Event	Probability	Human Impact	Property Impact	Business Impact	Overall Impact Rating	Risk Rating
	A, B, C, or D (Table 1)	1, 2, 3, or 4	1, 2, 3, or 4	1, 2, 3, or 4	4-12 (Table 2)	(Table 3)
Electrical Failure	B	2	1	4	7 (Serious)	Moderate
Generator Failure	C	2	2	4	8 (Critical)	Moderate
Transportation Emergency	C	1	1	3	5 (Serious)	Moderate
Fuel Shortage	C	1	1	2	4 (Marginal)	Very Low
Water Emergency	C	2	2	4	8 (Critical)	Moderate
Sewer Failure	C	1	1	3	5 (Serious)	Moderate
Fire Alarm Failure	B	1	1	2	4 (Marginal)	Low
Communications Failure	B	1	2	2	5 (Serious)	Moderate
Medical Gas Failure	C	2	2	3	7 (Serious)	Moderate
Medical Vacuum Failure	C	1	1	2	4 (Marginal)	Very Low
HVAC Failure	B	2	3	3	8 (Critical)	High
Information Systems Failure	B	1	1	2	4 (Marginal)	Marginal
Fire - Internal	C	3	4	4	11 (Catastrophic)	Moderate

Flood - Internal	C	3	4	4	11 (Catastrophic)	Moderate
Supply Shortage	C	2	1	3	6 (Serious)	Moderate
Structural Damage	B	2	4	4	10 (Critical)	High
HAZMAT Exposure - Internal	C	3	1	4	8 (Critical)	Moderate

Pee Dee Center Hazard Risk Analysis Tool Human Related Events						
Event	Probability	Human Impact	Property Impact	Business Impact	Overall Impact Rating	Risk Rating
	A, B, C, or D (Table 1)	1, 2, 3, or 4	1, 2, 3, or 4	1, 2, 3, or 4	4-12 (Table 2)	(Table 3)
Mass Casualty Incident (Trauma)	C	3	1	4	8 (Critical)	Moderate
Mass Casualty Incident (Infectious)	D	3	1	4	8 (Critical)	Low
Terrorism - Biological	C	4	1	4	9 (Critical)	Moderate
Civil/Domestic Disturbance	B	3	2	3	8 (Critical)	High
Labor Action	D	1	1	3	5 (Serious)	Very Low
Bomb Threat	B	2	1	3	6 (Serious)	Moderate

Pee Dee Center Hazard Risk Analysis Tool Events Involving Hazardous Materials						
Event	Probability	Human Impact	Property Impact	Business Impact	Overall Impact Rating	Risk Rating
	A, B, C, or D (Table 1)	1, 2, 3, or 4	1, 2, 3, or 4	1, 2, 3, or 4	4-12 (Table 2)	(Table 3)
Mass Casualty HAZMAT Incident	D	3	4	4	11 (Catastrophic)	Low
Small Casualty HAZMAT Incident	C	2	3	3	8 (Critical)	Moderate
Chemical Exposure - External	C	3	1	3	7 (Serious)	Moderate
Small – Medium sized Internal Spill	C	2	2	2	6 (Serious)	Moderate
Large Internal Spill	D	3	3	3	9 (Critical)	Low
Terrorism - Chemical	C	3	1	4	8 (Critical)	Moderate
Radiological Exposure	C	3	2	4	9 (Critical)	Moderate

Saleeby Center Hazard Risk Analysis Tool Naturally Occurring Events						
Event	Probability	Human Impact	Property Impact	Business Impact	Overall Impact Rating	Risk Rating
	A, B, C, or D (Table 1)	1, 2, 3, or 4	1, 2, 3, or 4	1, 2, 3, or 4	4-12 (Table 2)	(Table 3)
Hurricane	C	2	2	3	7 (Critical)	Moderate
Severe thunderstorm	A	2	2	2	6 (Serious)	Moderate
Tornado	B	2	4	4	10 (Critical)	High
Blizzard	C	1	2	2	5 (Serious)	Moderate
Extreme Heat	A	2	1	2	5 (Serious)	Moderate
Extreme Cold	B	1	1	2	4 (Marginal)	Low
Ice Storm	B	2	3	3	8 (Critical)	High
Earthquake	C	2	3	4	9 (Critical)	Moderate
Fire - External	C	2	3	3	8 (Critical)	Moderate
Flood – External	B	1	3	3	7 (Serious)	Moderate
Epidemic (Pandemic)	B	3	1	3	7 (Serious)	Moderate

Saleeby Center Hazard Risk Analysis Tool Technological / Infrastructure Events Internal/External						
Event	Probability	Human Impact	Property Impact	Business Impact	Overall Impact Rating	Risk Rating
	A, B, C, or D (Table 1)	1, 2, 3, or 4	1, 2, 3, or 4	1, 2, 3, or 4	4-12 (Table 2)	(Table 3)
Electrical Failure	B	2	1	4	7 (Serious)	Moderate
Generator Failure	C	2	2	4	8 (Critical)	Moderate
Transportation Emergency	C	1	1	3	5 (Serious)	Moderate
Fuel Shortage	C	1	1	2	4 (Marginal)	Very Low
Water Emergency	C	2	2	4	8 (Critical)	Moderate
Sewer Failure	C	1	1	3	5 (Serious)	Moderate
Fire Alarm Failure	B	1	1	2	4 (Marginal)	Low
Communications Failure	B	1	2	2	5 (Serious)	Moderate
Medical Gas Failure	B	3	2	3	8 (Critical)	High
Medical Vacuum Failure	B	2	1	3	6 (Serious)	Moderate
HVAC Failure	B	2	3	3	8 (Critical)	High
Information Systems Failure	B	1	1	2	4 (Marginal)	Marginal
Fire - Internal	C	3	4	4	11 (Catastrophic)	Moderate

Flood - Internal	C	3	4	4	11 (Catastrophic)	Moderate
Supply Shortage	C	2	1	3	6 (Serious)	Moderate
Structural Damage	B	2	4	4	10 (Critical)	High
HAZMAT Exposure - Internal	C	3	1	4	8 (Critical)	Moderate

Saleeby Center Hazard Risk Analysis Tool Human Related Events						
Event	Probability	Human Impact	Property Impact	Business Impact	Overall Impact Rating	Risk Rating
	A, B, C, or D (Table 1)	1, 2, 3, or 4	1, 2, 3, or 4	1, 2, 3, or 4	4-12 (Table 2)	(Table 3)
Mass Casualty Incident (Trauma)	C	3	1	4	8 (Critical)	Moderate
Mass Casualty Incident (Infectious)	D	3	1	4	8 (Critical)	Low
Terrorism - Biological	C	4	1	4	9 (Critical)	Moderate
Civil/Domestic Disturbance	B	3	2	3	8 (Critical)	High
Labor Action	D	1	1	3	5 (Serious)	Very Low
Bomb Threat	B	2	1	3	6 (Serious)	Moderate

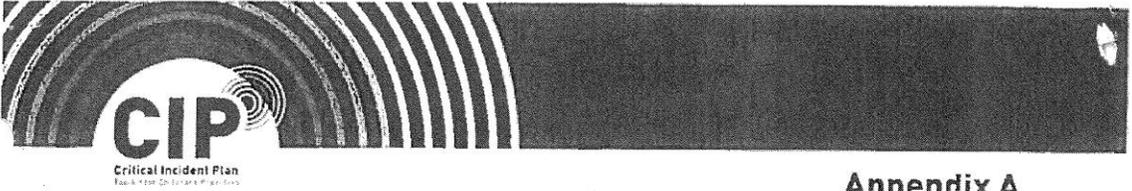
Saleeby Center Hazard Risk Analysis Tool Events Involving Hazardous Materials						
Event	Probability	Human Impact	Property Impact	Business Impact	Overall Impact Rating	Risk Rating
	A, B, C, or D (Table 1)	1, 2, 3, or 4	1, 2, 3, or 4	1, 2, 3, or 4	4-12 (Table 2)	(Table 3)
Mass Casualty HAZMAT Incident	D	3	4	4	11 (Catastrophic)	Low
Small Casualty HAZMAT Incident	C	2	3	3	8 (Critical)	Moderate
Chemical Exposure - External	C	3	1	3	7 (Serious)	Moderate
Small – Medium sized Internal Spill	C	2	2	2	6 (Serious)	Moderate
Large Internal Spill	D	3	3	3	9 (Critical)	Low
Terrorism - Chemical	C	3	1	4	8 (Critical)	Moderate
Radiological Exposure	C	3	2	4	9 (Critical)	Moderate

WHITTEN CENTER

Risk Assessment Results

Below are the compiled assessments results in order of total results

Risk	Total Score
Violence	10
Medical Emergency	9
Epidemic	9
Hazmat Exposure	9
Missing Person	8
Community Disaster	8
Fire (internal)	8
HVAC Failure	8
Bomb Threat	7
Severe Storm/flooding	7
Severe Cold Conditions	7
Water Contamination	7
Gas Leak/Explosion	7
Lighting Occurrence	5
Electrical Failure	5
Generator Failure	5



Appendix A

Emergency Preparedness Risk Assessment

Compiled Assessment

EVENT	LIKELIHOOD			LIFE THREAT	HEALTH/ SAFETY	RISK			PREPAREDNESS			TOTAL	
	HIGH	MOD	LOW			HIGH Business Impact	MOD Business Impact	LOW Business Impact	POOR	FAIR	GOOD		
SCORE	3	2	1	5	4	3	2	1	3	2	1		
HUMAN													
Bomb threat			✓		✓							✓	7
Child Abduction /Missing Child		✓			✓						✓	✓	8
Community Disaster		✓			✓						✓	✓	8
Medical Emergency (Anaphylaxis, choking, fracture)	✓			✓							✓	✓	9
Violence		✓			✓						✓	✓	9
NATURAL													
Epidemic		✓		✓							✓	✓	9
Lightning occurrence		✓									✓	✓	7
Severe storm/flooding		✓									✓	✓	7
Severe cold conditions		✓									✓	✓	7
Water contamination			✓		✓						✓	✓	7
TECHNICAL													
Electrical Failure			✓								✓	✓	5
Fire, Internal		✓			✓						✓	✓	5
Generator Failure		✓			✓						✓	✓	5
Hazmat Exposure		✓			✓						✓	✓	5
HVAC Failure		✓									✓	✓	5
Gas Leak/explosion		✓			✓						✓	✓	5

➤ Appendix B (Consumer population risk/needs assessment):

COASTAL CENTER

NAME	U N IT	O 2	C P A P	Feedi ng TUBE s	Whe elch airs	Tr ac h	W alk er	Col ost omy	Dia be tic	Sup ra Cat h	He lm et	<u>Uro sto my</u>	Pac ema ker	V N S	Ven tilat or	Hear t Moni tor
Janet Bailey	1 1 0				YES											
Lynn Clarend on	1 1 0			YES	YES											
William Fletcher	1 1 0				YES											
James Hardy	1 1 0		Y E S	YES	YES											
Willis Hood	1 1 0				YES											
Jennifer Hyman	1 1 0				YES											
Greg Johnson	1 1 0				YES											
<u>Sam Middelt on</u>	1 1 0				YES											
<u>Harold Reuss</u>	1 1 0				YES											
Dawson Calvin <u>Rewis</u>	1 1 0				YES											
<u>Sheils Saulters</u>	1 1 0			YES	YES											
Joe Singleta ry	1 1 0			YES	YES											
Terry Smalls	1 1 0				YES											
Chrissy Stevens	1 1 0				YES											

<u>Kashmir</u> <u>e</u> Vought	1 1 0			YES	YES												
Louis Wynn	1 1 0		Y E S		YES												
Jon <u>Agostini</u>	3 1 0				YES												
Hiram Elijah <u>Blick</u>	3 1 0				YES												
Walter Bowma n	3 1 0				YES												
Andre Brown	3 1 0																
Nicole Cobb	3 1 0								YE S								
Lula B Davis	3 1 0																
Sheryl Ford	3 1 0																
Lorraine Gaskins	3 1 0				YES												
Carol Henders on	3 1 0				YES												
Iesha Heywar d	3 1 0					Y E S											YES
Dennis <u>Lapiene</u>	3 1 0					Y E S											
Dorothy <u>Micucci</u>	3 1 0				YES												
Andrew Myers	3 1 0																

Sylvia O'Quinn	3 1 0			YES					YES						
Richard Venters	3 1 0			YES											
Robert Westbury	3 1 0														
Jessie Aiken	5 1 0			YES											
Angelica Beckman	5 1 0			YES											
Carlton Brown	5 1 0		YES	YES											
Oscar A Crosby	5 1 0	Y E S	YES	YES	Y E S										
Charles Davis	5 1 0		YES	YES											
Melissa Dean	5 1 0	Y E S	YES	YES	Y E S										
William Dusenberry	5 1 0		YES	YES											
Karin Garbani	5 1 0			YES											
Bonnie Graham	5 1 0	PRN	YES	YES											
Tresa Hipp	5 1 0		YES	YES											
Calvin Bull Jackson	5 1 0			YES											
Sheila Lain	5 1 0		YES	YES											

Tyrone Mikell	510	PRN	YES	YES	YES													
Lionel Myers	510		YES	YES	YES													
George Owen	510		YES	YES														
Joyce Pinckney	510	PRN	YES	YES														
Joan Anderson	710			YES														
Ilona Baldwin	710			YES														
James Carter	710			YES														
Dawn Cranwell	710																	
Dorothy Dunmeyer	710																	
James Hill	710			YES														
Billy Meridith	710																	
Antiwar Middelton	710			YES														
Christina Middelton	710			YES						YES								
Kathleen Mims	710			YES														
Phillip Owens	710			YES														

Brian Pulls	7 1 0				YES												
Jennifer Rakes	7 1 0				YES			YES				YES					
Anthony Ross	7 1 0				YES							YES					
Sandra Seabrook	7 1 0																
Timothy <u>Velte</u>	7 1 0				YES			YES				YES					
Wayne Austin	8 1 0				YES												
Ben Burns	8 1 0			YES	YES												
Chris Gibson	8 1 0																
Allen <u>Greeno</u>	8 1 0																
Charles Brad Horton	8 1 0																
John <u>Mazell</u>	8 1 0																
<u>Ameal</u> John Milligan	8 1 0				YES												
John Paul	8 1 0				YES												
William <u>Ravenel</u>	8 1 0			YES													
David Reed	8 1 0				YES												

Julius Singleton	810			YES										
Ernest Smalls	810			YES										
Ralph Walls	810													
Donald Webb	810													
Michael Weston	810													
Brian Wood	810			YES										
Katrina Boyer	910			YES						YES				
Bonnie Brandenburg	910		YES	YES										
<u>Kevin Bresch</u>	910		YES	YES							Y E S			
Vonda Donahue	910			YES										
<u>Troy Driggers</u>	910			YES							Y E S			
<u>Flora Hiott</u>	910			YES							Y E S			
<u>Deborah Hohman</u>	910			YES										
Sonya Hunt	910			YES							Y E S			
Sylvia Jenkins	910			YES										

Sierra King	9 1 0														YES	
Debra <u>Lein</u>	9 1 0		YES	YES												
Karen <u>Rohe</u>	9 1 0			YES												
Ola Shell	9 1 0		YES	YES												
Lula Wright				YES												

NAME	UNI T	O2	CPA P	Feeding Tubes	Wheelcha irs	Trac h	Walk er	Colosto my	Helm et
<u>Shaylyn Cooper</u>	320								
Ida Fuller	320								
Brenda Gaskins	320								
<u>Delicia Means</u>	320								
Susan Stuckey	320								
Darlene Thomas	320								
<u>Turquoiz Treadwell</u>	320								
Mary Williams	320								
Rachel Hetherington	420								
Alexandra Kelly	420								
Christina Maynard	420								
Rose Miller	420						YES		
Misty Paxton	420								
<u>Enala Phiri</u>	420								
<u>Deanna Polke</u>	420								
<u>Charlene Rolack</u>	420	PRN							
Shalonda Weston	420								
<u>Juan Aldea</u>	520								
Darian Brown	520								
Quentin Brown	520								
Charles Clark	520				YES				YES
Nicholas Creel	520								
John Edwards	520								
John Matt Loy	520								
Melvin <u>Muckelvaney</u>	520						YES		
<u>Michael Omerod</u>	520						YES		
<u>Dwayne Peeples</u>	520								
Eddie Rios	520								
Edwards Sweat	520				YES (PRN)		YES		
<u>Jefferey Vallentine</u>	520								
<u>Sedrick Williams</u>	520								
Destin Wright	520								
Tony Anderson	620								
<u>Jarrott Brandenburg</u>	620								
<u>Rene Cauette</u>	620								

Robert Cooper	620	YES at HS							
Gerald DeLoach	620								
Kerry Fowler	620								
Recarldo Haynes	620						YES		
Micheal Headley	620								
Ryan Holbert	620								
Derrick Lemon	620								
Leonard Lester	620								
Dedrick Mack	620								
Shalom Shaul	620								
Jose Vega	620								
Nicholas Young	620								
Zigmond Washington	620								

MIDLANDS CENTER

Magnolia

	Feeding Tube Gravity/Pump	Tracheostomy	Oxygen CPAP	Wheelchair	Ostomy/ Nebulizer Suction
Antley, L	Pump			X	
Bailey, M	Pump			X	
Corley, B	Pump			X	
Fetner, C	Pump			X	Nebulizer Suction
Gilliard, R	Pump	X	Oxygen	X	Nebulizer Suction
Green, I	Gravity			X	
Hallman, J	PO			X	
Joyner, E	Pump			X	
Kirkland, J	Gravity			X	
McMillan, J	Pump		Oxygen	X	Nebulizer Suction
Monroe, D	PO			X	
Peterson, D	PO			X	
Phillips, G	Pump			X	Colostomy
Rawl, C	Pump			X	
Scott, M	Gravity		Oxygen	X	Nebulizer Suction
Sewell, A	Gravity		Oxygen	X	
Shannon, J	Gravity			X	
Simmons, E	PO			X	

Truell, T	PO			X	
West, T	Gravity			X	

Sycamore

	Feeding Tube Gravity/Pump	Tracheostomy	Oxygen CPAP	Wheelchair	Ostomy/ Nebulizer Suction
Baker, C	Pump			X	
Ballentine, M	Pump			X	
Blakeney, K	Pump			X	Nebulizer Suction
Branham, K	Gravity			X	
Campbell, C	Pump			X	
Causey, N	Pump			X	
Epps, K	Pump			X	
Gardner, Z	Feeding Tube Meds only and supplements if needed.				
Hall, R	Pump			X	
Lagrone, V	Pump		CPAP	X	Nebulizer Suction
Lightner, M	Pump			X	
Moree, B	Pump			X	
Nelson, M	Gravity			X	
Parker, C	Pump			X	
Peebles, J	Pump			X	
Sanders, A	Gravity			X	
Simmons, C	Pump			X	

All males wear an abdominal binder except A. sanders.

M. Ballentine has a special cup.

Mesquite

	Feeding Tube Gravity/Pump	Tracheostomy	Oxygen CPAP	Wheelchair	Ostomy/ Nebulizer Suction
Bailey, W	Gravity			X	
Butcher, B	Feeding Tube Bolus feeding and pleasure			X	

	feeding breakfast and lunch. Water flush via g-tube				
Childers, A				X	
Cook, R				X	
Gallman, H	Feeding Tube (Bolus feeding and eats by mouth)			X	
Johnson, P				X	
Marshall, M				X	
Moore, K				X	
Parris, C					
Scott, C				X	
Sumter, L	Feeding Tube (for water flushing only; eats by mouth)			X	
Taylor, D	Gravity				Buggy Bed

Willow

	Feeding Tube Gravity/Pump	Tracheostomy	Oxygen CPAP	Wheelchair	Ostomy/ Nebulizer Suction
Booker, R				X	
Cheatham, J				X	
Dendy, R	Gravity				
Evans, J				X	
Gunter, J	Gravity			X	
Jenkins, C				X	
Kennedy, S				X	
Robinson, W	Gravity			X	
Sexton, B				X	
Valentine D				X	

Palm

	Feeding Tube Gravity/Pump	Tracheostomy	Oxygen CPAP	Wheelchair	Ostomy/ Nebulizer Suction

Thomas, J		L Trach Tube			Nebulizer Suction
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Palmetto

	Feeding Tube Gravity/Pump	Tracheostomy	Oxygen CPAP	Wheelchair	Ostomy/ Nebulizer Suction
Sanders, L			CPAP		

Juniper

	Feeding Tube Gravity/Pump	Tracheostomy	Oxygen CPAP	Wheelchair	Ostomy/ Nebulizer Suction
Fisher, A				X	

Do Not Lay Flat/Requires Commercial Ambulance for Transport

Key	
Not Applicable	
DONOT LAY FLAT	
REQUIRES COMMERCIAL AMBULANCE	

Name	DO NOT LAY FLAT	Commercial Ambulance
Magnolia		
Melissa Bailey		
Betty Corley		
Carolyn Fetner		
Ira Green		
Ernest Joyner		
Josephine McMillan		
Gene Ray Phillips		
Christie Rawl		
Monique Scott		
Amanda Sewell		
Thomas Truell		
Tamara West		
Mesquite		
Brenda Butcher		
Amy Childers		
Regina Cook		
Harriet Gallman		

Deborah Taylor		
Wilder Bailey		
Palm		
Tracey Coleman		
Thomas Edwards		
David Griffin		
Wilbur Murray		
David Richardson		
Nathaniel Singleton		
Johnny Thomas		
Delano Watts		
Timothy Withers		

Name	DO NOT LAY FLAT	Commercial Ambulance
Palmetto		
Marian Derek		
Gail Foxworth		
Rachel Gatlin		
Jennifer Stewart		
Blake Williams		
Latoya Sanders		
Angela Clary		
Cleo Redd		
Sycamore		
Cynthia Baker		
Michael Ballentine		
Kimberly Blakeney		
Katrina Branham		
Nick Causey		
Karley Epps		
Rodney Hall		
Vivikka Lagrone		
Barbara Moree		
Marina Nelson		
Cynthia Parker		
James Peebles		
Adam Sanders		
Clarence Simmons		
Moses Lightner		
Michael Ballentine		

PEE DEE/SALEEBY CENTER

	5/29/20								Support Needs			At Risk (Nursing)		
Fac	Addr	Confidential Consumer ID	Sex	DOB	Age	Day Prog	IQ	Adaptive	Frequent Intense Physical Aggression	24 Hour Nursing	Uses Wheel chair	CPAP used (Yes/No)	O2 Used (Yes/No)	Feeding Tube Used (Yes/No)
PD	203	A. Calcutt	F	04/19/69	51	WAC	Sev.	Mod.	Yes	No	No	No	No	No
PD	203	J. Farrington	F	11/27/77	42	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	203	S. Frank	F	03/01/84	36	WAC	Sev.	Prof.	No	No	No	No	No	No
PD	203	P. Herbert	F	08/19/66	53	ADS	Mod.	Mod.	No	Yes	Yes	No	No	No
PD	203	T. Hood	F	07/24/64	55	ADS	Prof.	Sev.	No	Yes	No	No	No	No
PD	203	J. Hudson	F	06/09/70	49	ADS	Sev.	Sev.	No	No	No	No	No	No
PD	203	M. Johnson	F	06/11/72	47	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	203	C. Mckay	F	10/20/41	78	ADS	Mod.	Prof.	No	No	Yes	No	No	No
PD	203	B. Mcleod	F	11/09/52	67	ADS	Mild	Mild	Yes	Yes	No	No	No	No
PD	203	J. Mcqueen	F	07/06/59	60	ADS	Prof.	Prof.	No	No	Yes	No	No	Yes
PD	203	R. Miles	F	03/10/72	48	ADS	Prof.	Prof.	No	No	Yes	No	No	No
PD	203	J. Murray	F	11/21/58	61	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	203	D. Nero	F	07/18/57	62	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	203	C. Taylor	F	01/27/66	54	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	203	J. Wingate	F	11/24/52	67	WAC	Prof.	Prof.	No	No	No	No	No	No
PD	204	J. Baker Jr	M	07/14/47	72	ADS	Prof.	Mod.	No	No	No	No	No	No
PD	204	M. Barr	M	08/20/44	75	WAC	Prof.	Prof.	No	No	No	No	No	No
PD	204	L. Benjamin Jr	M	05/25/51	69	WAC	Prof.	Prof.	No	No	No	No	No	No
PD	204	G. Brown	M	07/20/59	60	WAC	Sev.	Sev.	No	No	No	No	No	No
PD	204	A. Cato	M	06/07/51	68	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	204	R. Creel	M	04/09/67	53	WAC	Prof.	Prof.	No	No	Yes	No	No	No
PD	204	M. Cribb	M	06/06/55	64	WAC	Mild	Mod.	No	No	No	No	No	No
PD	204	D. Dunham	M	01/02/79	41	WAC	Mod.	Mod.	Yes	Yes	No	No	No	No
PD	204	A. Frederick	M	02/09/97	23	WAC	Mod.	Mod.	Yes	Yes	No	No	No	No
PD	204	J. Gibson	M	03/11/74	46	MBW	Prof.	Prof.	No	No	No	No	No	No
PD	204	M. Greene	M	02/27/80	40	WAC	Sev.	Prof.	No	No	No	No	No	No
PD	204	J. Jordan	M	06/01/64	55	WAC	Sev.	Sev.	No	No	No	No	No	No
PD	204	S. Marcengill	M	11/08/90	29	WAC	Mod.	Sev.	Yes	No	No	No	No	No
PD	204	M. Stevens	M	02/07/70	50	WAC	Prof.	Prof.	No	No	No	No	No	No
PD	204	W. Stewart	M	01/15/50	70	WAC	Prof.	Sev.	No	No	No	No	No	No
PD	204	M. Walters	M	04/18/89	31	WAC	Mild	Mild	Yes	No	No	No	No	No
PD	204	H. Weatherford	M	10/31/48	71	WAC	Prof.	Prof.	No	No	No	No	No	No
PD	205	O. Adams	M	12/01/55	64	WAC	Mild	Mild	Yes	No	No	No	No	No
PD	205	L. Applegate	M	08/21/56	63	WAC	Sev.	Sev.	Yes	No	No	No	No	No
PD	205	C. Crosby	M	03/30/93	27	WAC	Sev.	Sev.	Yes	No	No	No	No	No
PD	205	C. Crowder	M	08/22/56	63	WAC	Mild	Mild	Yes	No	No	No	No	No
PD	205	C. Dingle	M	10/03/74	45	WAC	Sev.	Mod.	No	No	No	No	No	No
PD	205	B. Gary	M	04/25/69	51	WAC	Mod.	Mod.	Yes	No	No	No	No	No
PD	205	W. Hayes	M	04/26/61	59	WAC	Prof.	Prof.	No	No	No	No	No	No

PD	205	J. Herriott	M	07/14/79	40	WAC	Mod.	Sev.	Yes	Yes	No	No	No	No
PD	205	D. Johnson III	M	05/11/68	52	WAC	Mod.	Mod.	Yes	No	No	No	No	No
PD	205	P. McKissick	M	12/20/53	66	WAC	Sev.	Sev.	No	No	No	No	No	No
PD	205	B. Oarr	M	11/12/98	21	WAC	Mild	Mild	No	No	No	No	No	No
PD	205	D. Parker	M	07/28/64	55	WAC	Sev.	Mod.	Yes	Yes	No	No	No	No
PD	205	G. Pringle	M	01/21/73	47	WAC	Prof.	Prof.	Yes	No	No	No	No	No
PD	205	D. Townsend	M	01/11/65	55	WAC	Mod.	Mod.	No	No	No	No	No	No
PD	301	W. Atkinson	M	08/06/78	41	WAC	Prof.	Prof.	Yes	No	No	No	No	No
PD	301	J. Barber	M	01/14/93	27	WAC			Yes	No	No	No	No	No
PD	301	J. Baskins	M	01/30/76	44	WAC	Sev.	Prof.	Yes	NA	No	No	No	No
PD	301	M. Bennett	M	04/01/77	43	WAC	Sev.	Sev.	Yes	No	No	No	No	No
PD	301	B. Conklin	M	01/22/81	39	WAC	Mild	Mild	Yes	No	No	No	No	No
PD	301	B. Dudley	M	01/27/92	28	WAC	Mod.	Mod.	Yes	No	No	No	No	No
PD	301	A. Fore	M	06/08/96	23	PBS	Mod.	Mod.	Yes	No	No	No	No	No
PD	301	R. Gordon	M	01/17/00	20	WAC	Mod.	Mod.	No	No	No	No	No	No
PD	301	L. Howard	M	07/26/72	47	WAC	Sev.	Sev.	No	No	No	No	No	No
PD	301	T. Marion	M	04/10/88	32	WAC	Mod.	Mod.	Yes	No	No	No	No	No
PD	301	C. Marsh	M	07/15/80	39	WAC	Prof.	Mild	Yes	No	No	No	No	No
PD	301	J. McQueen	M	02/08/82	38	WAC	Sev.	Sev.	Yes	Yes	No	No	No	No
PD	301	D. Parker	M	09/15/75	44	WAC	Prof.	Sev.	No	No	No	No	No	No
PD	301	J. Parks	M	06/23/72	47	WAC	Prof.	Prof.	No	No	No	No	No	No
PD	301	B. Woods	M	10/01/99	20	WAC	No Score	No Score	Yes	No	No	No	No	No
PD	301	C. Wright	M	04/07/76	44	WAC	Sev.	Sev.	No	No	No	No	No	No
PD	302	C. Brumett	F	07/04/81	38	WAC	Mod.	Mod.	Yes	No	No	No	No	No
PD	302	C. Dunlap	F	09/20/54	65	WAC	Prof.	Prof.	No	No	No	No	No	No
PD	302	T. Edwards	F	06/05/86	33	WAC	Mild	Mild	Yes	No	No	No	No	No
PD	302	B. Mcleod	F	10/30/53	66	WAC	Sev.	Sev.	No	Yes	No	No	No	No
PD	302	A. Myers	F	08/14/75	44	WAC	Mild	Mild	Yes	No	No	No	No	No
PD	302	H. Reine	F	07/25/86	33	WAC	Mild	Mild	Yes	No	No	No	No	No
PD	302	J. Stokes	F	02/08/83	37	WAC	Mild	Mild	Yes	No	No	No	No	No
PD	304	C. Ackerman	M	10/07/98	21	WAC	Mild	Mod.	Yes	No	No	No	No	No
PD	304	J. Chatman	M	06/10/86	33	WAC	Mod.	Mod.	No	No	No	No	No	No
PD	304	W. Dillow Jr	M	11/12/82	37	WAC	Prof.	Sev.	No	No	No	No	No	No
PD	304	TyK. Franklin	M	05/29/94	26	WAC	Mod.	Mod.	Yes	No	No	No	No	No
PD	304	W. Hammel	M	10/22/87	32	WAC	Mod.	Sev.	Yes	No	No	No	No	No
PD	304	I. Harper	M	11/29/82	37	WAC	Prof.	Sev.	No	No	No	No	No	No
PD	304	K. Kearse	M	05/20/93	27	WAC	Mod.	Mod.	Yes	No	No	No	No	No
PD	304	J. Matthews	M	07/02/86	33	ADS	Prof.	Prof.	No	No	No	No	No	Yes
PD	304	V. Newell	M	01/13/94	26	WAC	Mod.	Mod.	Yes	No	Yes	No	No	No
PD	304	B. Richardson	M	06/02/91	28	WAC	Sev.	Sev.	Yes	No	No	No	No	No
PD	304	J. Robinson	M	07/07/87	32	WAC	Mod.	Mod.	Yes	No	No	No	No	No
PD	304	B. Snell	M	10/10/79	40	ADS	Prof.	Sev.	No	No	No	No	No	No
PD	304	J. Turner	M	01/07/86	34	WAC	Prof.	Sev.	No	No	No	No	No	No
PD	304	A. Waring	M	07/29/89	30	WAC	Mod.	Mod.	No	No	No	No	No	No
PD	304	B. Williams	M	01/22/87	33	WAC	Mod.	Sev.	No	No	No	No	No	No

PD	304	J. Wingard	M	08/08/89	30	WAC	Mod.	Sev.	No	No	No	No	No	No
PD	305	R. Arant	M	05/01/61	59	WAC	Prof.	Sev.	No	No	No	No	No	No
PD	305	C. Brown	M	08/21/59	60	ADS	Prof.	Prof.	No	Yes	Yes	No	No	Yes
PD	305	D. Calcutt	M	11/30/50	69	WAC	Prof.	Prof.	No	No	No	No	No	No
PD	305	G. Daggett	M	02/22/54	66	WAC	Prof.	Prof.	No	No	No	No	No	No
PD	305	T. Eaddy	M	11/02/61	58	WAC	Prof.	Sev.	No	No	No	No	No	No
PD	305	W. Garner	M	11/02/58	61	ADS	Prof.	Prof.	No	Yes	Yes	No	No	No
PD	305	A. Hinson	M	12/24/70	49	ADS	Sev.	Mod.	No	Yes	Yes	No	No	No
PD	305	R. Hutchinson	M	10/30/80	39	ADS	Mod.	Prof.	No	Yes	Yes	No	No	No
PD	305	J. Larrimore	M	01/29/51	69	ADS	Prof.	Prof.	No	No	Yes	No	No	No
PD	305	S. Mack	M	07/28/71	48	WAC	Mod.	Sev.	Yes	No	No	No	No	No
PD	305	J. McKnight	M	08/05/62	57	WAC	Mild	Mild	Yes	Yes	No	No	No	No
PD	305	B. Pinkney	M	12/01/70	49	WAC	Prof.	Prof.	Yes	No	No	No	No	No
PD	305	J. Prophet	M	08/18/66	53	WAC	Prof.	Prof.	Yes	No	No	No	No	No
PD	305	C. Reed	M	03/14/63	57	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	305	K. Strickland Jr	M	09/19/58	61	WAC	Prof.	Prof.	Yes	No	No	No	No	No
PD	305	M. Williams	M	03/30/98	22	WAC	Mod.	Mild	Yes	No	No	No	No	No
PD	306	C. Beyer	M	04/01/88	32	ADS	Sev.	Prof.	No	No	No	No	No	No
PD	306	R. Derr	M	07/28/89	30	ADS	Prof.	Prof.	Yes	No	No	No	No	No
PD	306	A. Dolford	M	08/17/66	53	WAC	Prof.	Sev.	No	No	No	No	No	No
PD	306	D. Elliott	M	10/18/68	51	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	306	J. Floyd	M	10/29/61	58	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	306	R. Gore	M	09/05/61	58	ADS	Prof.	Prof.	No	No	Yes	No	No	No
PD	306	J. Kemp Jr	M	02/22/68	52	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	306	W. Kithcart	M	08/30/74	45	ADS	Prof.	Prof.	No	No	Yes	No	No	Yes
PD	306	D. Marshall Jr	M	08/22/75	44	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	306	S. Mills	M	05/01/74	46	WAC	Prof.	Prof.	No	No	No	No	No	No
PD	306	D. Mincey	M	03/14/79	41	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	306	T. Stanton	M	11/23/68	51	WAC	Sev.	Sev.	Yes	No	No	No	No	No
PD	306	J. Van Patten Jr	M	03/18/67	53	ADS	Prof.	Prof.	No	No	No	No	No	No
PD	306	M. Yarborough	M	07/04/66	53	WAC	Sev.	Prof.	No	No	No	No	No	No
SC	Center	M. Battle	F	10/19/71	48	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	Center	G. Bratcher	M	04/03/75	45	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	Center	B. Bryant	M	08/21/67	52	HAB	Prof.	Prof.	No	No	No	No	No	Yes
SC	Center	B. Dana	F	11/13/42	77	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	Center	D. Dillinger	M	01/10/57	63	HAB	Mod.	Mod.	No	No	No	No	Yes	Yes
SC	Center	E. Ellerbe	M	09/20/94	25	HAB	Mod.	Mild	Yes	Yes	Yes	Yes	Yes	No
SC	Center	S. Hall	F	06/04/62	57	HAB	Prof.	Prof.	No	Yes	NA	No	Yes	No
SC	Center	R. Hood	M	03/08/63	57	ADS	Prof.	Prof.	No	No	No	No	No	No
SC	Center	E. Hough	F	10/13/52	67	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	Center	B. Jackson	F	11/13/59	60	HAB	Prof.	Prof.	No	Yes	No	No	Yes	Yes
SC	Center	L. Jenkins	M	02/12/61	59	HAB	Prof.	Prof.	No	Yes	Yes	No	Yes	Yes
SC	Center	M. Johnson	F	04/16/70	50	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	Center	R. Johnson	M	03/24/54	66	HAB	Mod.	Mod.	No	Yes	Yes	No	No	Yes
SC	Center	Mary A. Jones	F	09/01/67	52	HAB	Sev.	Sev.	No	Yes	Yes	No	No	Yes
SC	Center	D. Kennedy	F	07/19/62	57	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes

SC	Center	S. Kinder	M	01/08/57	63	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	Center	F. McElveen	M	08/01/46	73	HAB	Prof.	Prof.	Yes	Yes	Yes	No	Yes	Yes
SC	Center	S. McGriff	M	11/08/49	70	HAB	Prof.	Prof.	Yes	Yes	Yes	No	No	No
SC	Center	F. Nobles Jr	M	07/07/72	47	HAB	Prof.	Prof.	No	No	Yes	No	No	Yes
SC	Center	A. Pearson	M	05/28/52	68	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	Center	B. Radford	F	02/23/77	43	HAB	Mod.	Mod.	Yes	Yes	Yes	No	No	Yes
SC	Center	T. Reagan	M	01/17/90	30	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	Center	B. Riggins	M	04/09/61	59	HAB	Prof.	Prof.	No	Yes	Yes	No	Yes	Yes
SC	Center	E. Rouse	M	09/25/65	54	HAB	Mod.	Mild	No	Yes	Yes	No	Yes	Yes
SC	Center	J. Webb Iii	M	07/17/57	62	HAB	Prof.	Prof.	No	No	No	No	No	Yes
SC	East	R. Bailey	M	12/14/54	65	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	East	K. Bellamy	M	09/30/55	64	HAB	Prof.	Sev.	No	Yes	Yes	Yes	No	No
SC	East	H. Davis	M	09/11/49	70	HAB	Prof.	Mod.	No	Yes	No	No	No	Yes
SC	East	G. Durant	F	02/13/64	56	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	East	J. Fields	M	12/24/93	26	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	East	S. Grimsley	F	03/11/92	28	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	East	T. Grimsley	F	12/08/72	47	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	East	J. Hammett	M	12/01/55	64	HAB	Mild	Mild	Yes	Yes	Yes	No	No	No
SC	East	C. Hapeman	M	02/23/90	30	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	East	C. Hepburn	M	03/14/89	31	HAB	Prof.	Sev.	No	Yes	Yes	No	No	Yes
SC	East	C. Holliday	F	03/06/61	59	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	East	P. Jackson	M	04/10/52	68	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	East	R. James	F	01/04/50	70	HAB	Prof.	Prof.	No	Yes	No	No	No	No
SC	East	M. Johnson	F	02/15/37	83	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	East	J. Jones	M	05/13/48	72	HAB	Sev.	Sev.	Yes	Yes	No	No	No	No
SC	East	T. Lokibe	M	10/29/92	27	HAB	Prof.	Sev.	No	Yes	Yes	No	No	Yes
SC	East	C. McGee	F	12/22/41	78	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	East	T. Miller	F	01/12/90	30	HAB	Mod.	Prof.	No	Yes	No	No	No	Yes
SC	East	J. Newton	M	07/01/83	36	HAB	Prof.	Sev.	No	Yes	Yes	No	No	Yes
SC	East	S. Parker	F	12/14/45	74	ADS	Prof.	Prof.	No	No	Yes	No	No	No
SC	East	L. Pearson	F	08/02/80	39	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	East	J. Pierce	F	12/05/97	22	HAB	Prof.	Sev.	No	Yes	Yes	No	No	Yes
SC	East	J. Pouncey	M	12/10/60	59	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	East	H. Ridges	F	09/16/53	66	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	East	J. Vanderhall	M	09/11/87	32	HAB	Mod.	Mild	No	Yes	Yes	No	No	No
SC	East	L. Williams	F	07/06/65	54	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	East	Ray S. Wright	M	11/18/63	56	HAB	Prof.	Prof.	No	Yes	Yes	Yes	No	Yes
SC	West	B. Belisle	M	03/13/60	60	HAB	Sev.	Prof.	No	Yes	Yes	No	No	No
SC	West	I. Blanton	F	07/19/57	62	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	West	W. Bright	M	11/16/64	55	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	West	C. Bryant	F	08/10/64	55	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	West	M. Burgess	F	09/30/21	98	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	West	J. Caples	M	07/16/50	69	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	West	A. Corbett	F	11/04/66	53	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	West	D. Derr	M	10/05/77	42	HAB	Sev.	Sev.	No	Yes	Yes	No	No	No
SC	West	T. Duke	M	12/04/68	51	HAB	Mod.	Mod.	No	Yes	Yes	No	No	No

SC	West	B. Eddington	F	03/23/73	47	HAB	Sev.	Mod.	Yes	No	Yes	No	No	Yes
SC	West	P. Higdon	M	10/29/66	53	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	West	S. Howle	F	03/05/55	65	HAB	Prof.	Prof.	No	Yes	Yes	No	No	Yes
SC	West	D. Hughes	M	04/28/58	62	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	West	J. Hutto	M	01/17/61	59	HAB	Mod.	Mod.	Yes	Yes	Yes	No	No	No
SC	West	D. Jenkins	M	07/11/02	17	PBS	Prof.	Prof.	Yes	Yes	Yes	No	No	Yes
SC	West	J. Marchant	M	07/04/43	76	HAB	Mod.	Mod.	No	Yes	Yes	No	No	No
SC	West	D. Moore	F	07/06/59	60	HAB	Prof.	Prof.	No	No	Yes	No	No	Yes
SC	West	K. Odom	F	01/24/75	45	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	West	W. Ogburn	M	08/25/66	53	HAB	Prof.	Prof.	No	Yes	No	No	No	No
SC	West	C. Owens	M	12/10/70	49	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	West	J. Samuels	F	01/07/60	60	HAB	Sev.	Prof.	Yes	Yes	Yes	No	No	No
SC	West	E. Short	F	07/12/57	62	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	West	P. Turbeville	F	03/08/67	53	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No
SC	West	Lelia M. Wright	F	01/22/51	69	HAB	Prof.	Prof.	No	Yes	Yes	No	No	No

WHITTEN CENTER

Unit 102

Consumer	Feeding Tube Pump	Trache	Oxygen/CPAP	Special Mattress
C. Tensley	✓			

Unit 104

Consumer	Feeding Tube Pump	Trache	Oxygen/CPAP	Special Mattress
J. Blackburn	✓			✓
T. Smith	✓			

Unit 105

Consumer	Feeding Tube Pump	Trache	Oxygen/CPAP	Special Mattress
M. McCauley				✓
P. Yarbrough	✓			

Unit 110

Consumer	Feeding Tube Pump	Trache	Oxygen/CPAP	Special Mattress
B. Chapman	✓			

Unit 201

Consumer	Feeding Tube Pump	Trache	Oxygen/CPAP	Special Mattress
J. Coyle	✓			
J. Dutcher	✓			
B. Dotson	✓			
J. Hamilton	✓			
P. Hanna	✓			
M. Houston	✓			
M. Laymon				✓
C. Shehan	✓			
T. Sims				✓
C. Tollison	✓			
S. Tuggle	✓			
F. Walker	✓			
L. Washington	✓			

Unit 204

Consumer	Feeding Tube Pump	Trache	Oxygen/CPAP	Special Mattress
J. Carter	✓			
T. Duncan	✓			
R. Latimer	✓			
M. Murphy	✓		✓	
P. Payne				✓
P. Smith				✓
B. Weiner	✓			
J. Wise				✓

Unit 205

Consumer	Feeding Tube Pump	Trache	Oxygen/CPAP	Special Mattress
S. Bagwell	✓	✓		✓
T. Bailey			✓	
S. Bailey				✓
T. Campbell			✓	
L. Hawkins	✓			
M. Hood	✓			
L. Houston	✓	✓		
J. Howell	✓	✓		
D. Ice				✓
C. Johnson	✓	✓	✓	✓

B. Moore	✓	✓		
K. Powell	✓			✓
B. Reed	✓			
J. Scott	✓			
T. Shell	✓			
C. Southard	✓			
K. Vaughn	✓			
T. Wooten	✓			✓

➤ Appendix C (Collaboration with state/local officials):
COASTAL CENTER



**DORCHESTER COUNTY, SOUTH CAROLINA
EMERGENCY MANAGEMENT DEPARTMENT**

212 Deming Way, Suite 3 | Summerville, SC 29483 | PHONE 843-832-0341/563-0341 | FAX 832-0343/563-0343

MEMORANDUM

June 5, 2020

Tommy McDaniel, Facility Administrator
South Carolina Department of Disabilities and Special Needs
Coastal Regional Center
9995 Miles Jamison Road
Summerville, SC 29485

Mr. McDaniel,

This letter serves as acknowledgement that the Dorchester County Emergency Management Department (EMD) has received your Disaster/Emergency Preparedness Plan. We appreciate your continued effort to ensure your facility is prepared for both natural and man-made disasters.

EMD is committed to supporting public health entities with emergency planning and coordination efforts. If we can be of further assistance, please do not hesitate to contact us.

Best Regards,

A handwritten signature in blue ink, appearing to read "Mario Formisano".

Mario Formisano
Director of Emergency Management
Dorchester County, SC

MIDLANDS CENTER

RICHLAND COUNTY
EMERGENCY SERVICES DEPARTMENT
1410 Laurens Street
Columbia, SC 29204



May 26, 2020

Ms. Angela L. Wright
Facility Manager
Midlands Regional Center
8301 Farrow Road
Columbia, SC 29203

REF: 2020 Emergency Disaster Preparedness Plan

Dear Ms. Wright,

We have received and reviewed the Midlands Regional Center Disaster Plan. This plan will be placed on file with the Richland County Emergency Services Department. Pertinent components were addressed and noted per DHEC Regulations 61-84 Section 1400. As required, please be sure to also submit a copy to DHEC. We will maintain this copy on file in our office.

Thank you,

A handwritten signature in blue ink, appearing to read "Michael J. Kalec", is written over a horizontal line.

Michael J. Kalec, Division Manager EMD
Richland County Emergency Manager

PEE DEE/SALEEBY CENTER

WHITTEN CENTER



EMERGENCY MANAGEMENT AGENCY

Joey Avery, ENP, CEM
EMA Director
JAVERY@Co.Laurens.SC.US

Tavi Hughes
EMA Administrative Assistant
thughes@Co.Laurens.SC.US

June 6, 2020

Mr. Randy Davis
Facilities Manger
Whitten Center
Clinton, S.C. 29325

Re: Emergency Evacuation and Shelter Plan

Dear Mr. Davis,

The Laurens County Emergency Management Agency has reviewed the Emergency Evacuation and Shelter Plan for Whitten Center. The plan appears to be comprehensive in emergency actions.

A current copy of the Emergency Evacuation and Shelter Plan will be kept on file at this office.

Should you have any questions or concerns please let me know.

Thank You

Joey Avery

Joey Avery, ENP, CEM
Director
Laurens County 911 / EMA

SMOKE ALARMS AND WEATHER RADIOS SAVE LIVES!!!

P.O. BOX 1396 LAURENS, SC 29360-1396 TELEPHONE: (864) 984-4731 or (864) 984-0812 FAX: (864) 984-0900

- Appendix D (Primary and secondary routes):

COASTAL CENTER

All routes identified start from Coastal Center's address at 9995 Miles-Jamison Road, Summerville, SC. The routes are identified as follows:

Midlands Regional Center-8301 Farrow Rd., Columbia, SC

- **Primary Route:**
Head northwest on Miles Rd/SC-S-18-377 toward Braly Dr. for 0.4 miles. Turn right on Gahagan Rd/SC-S-18-339. Continue on Gahagan Rd. for 1.2 miles. Continue on E. 6th S. St. for 0.3 miles. Turn right at S. Main St/SC-165/US-17 Alt. Continue to follow S. Main St/US -17 Alt. for 2.8 miles. Turn left to merge onto I-26 W for 91.8 miles. Take exit 107 B to merge onto I-20 E to Florence for 8.0 miles. Take exit 72 for SC-555 N for 3 miles. Turn left at Farrow Rd/SC-555 for 1.5 miles. Arrive at Midlands Regional Center. Estimated time to accomplish the relocation of the consumers dependent on traffic conditions is from 1 hour, 45 minutes to 4 hours, 0 minutes.
- **Secondary Route**
Head northwest on Miles Rd/SC-S-18-377 toward Braly Dr. for 1.0 miles. Turn right at Old Trolley Rd/SC-S-18-199/Trolley Rd. for 0.4 miles. Turn right at Bacons Bridge Rd/E. Carolina Ave/SC-165. Continue to follow E. Carolina for 1.7 miles. Turn left at W Richardson Ave/SC-165 for 1.0 miles. Turn right to stay on W Richardson Ave/ SC-165 for 128 feet. Turn left at US-78 for 9.0 miles. Turn right at SC-27 for 11.2 miles. Turn left at US-176 for 11.2 miles. Bear right at Bass Dr/US-15 for 5.1 miles. Bear left at SC-267/Tee Vee Rd. Continue to follow SC-267 for 8.7 miles. Turn right at McCords Ferry Rd/SC-267 for 14.4 miles. Turn left at SC-268/Screaming Eagle Rd. for 7.7 miles. Turn right at SC-268 W/Screaming Eagle Rd for 128 ft. Turn left at Percival Rd for 5.8 miles. Turn right at Alpine Rd. for 2.4 miles. Turn right at Two Notch Rd/Us-1 for 0.5 miles. Turn left a Rabon Rd. for 2.0 miles. Turn left at Farrow Rd/SC-555 S for 1.3 miles. Arrive at Midlands Regional Center. Estimated time to accomplish the relocation of the consumers dependent on traffic conditions is from 2 hours, 45 minutes to 5 hours, 0 minutes.

Pee Dee Regional Center-714 National Cemetery Rd., Florence, SC

- **Primary Route:**
Head northwest on Miles Rd/SC-S-18-377 toward Braly Dr. for 0.4 miles.

Turn right on Gahagan Rd/SC-S-18-339. Continue on Gahagan Rd. for 1.2 miles. Continue on E. 6th S. St. for 0.3 miles. Turn right at S. Main St/SC-165/US-17 Alt. Continue to follow S. Main St/US -17 Alt. for 2.8 miles. Turn left to merge onto I-26 W for 30.1 miles. Take exit 169 B to merge onto I-95 N to Florence for 74.8 miles. Take exit 160A to merge onto W David H. McLeod Blvd: I-20-SPUR E toward Florence for 2.3 miles. Turn left a W Palmetto St. for 2.4 miles. Turn right at US-301/US-52 for 0.7 miles. Turn left a Cherokee Rd/SC-S-21-13. Continue to follow SC-S-21-13 for 0.8 miles. Arrive at Pee Dee Regional Center. Estimated time to accomplish the relocation of the consumers dependent on traffic conditions is from 2 hour, 0 minutes to 4 hours, 15 minutes.

- Secondary Route

Head northwest on Miles Rd/SC-S-18-377 toward Braly Dr. for 0.4 miles. Turn right on Gahagan Rd/SC-S-18-339. Continue on Gahagan Rd. for 1.2 miles. Continue on E. 6th S. St. for 0.3 miles. Turn right at S. Main St/SC-165/US-17 Alt. Continue to follow US-17-Alt for 18.6 miles. Turn left at US-17-Alt/Us-52 for 1.8 miles. Bear left at US-17-Alt N/US-52. Continue to follow US-52 N for 37.8 miles. Turn left at US-52 for 37.9 miles. Turn right at Cherokee Rd/SC-S-21-13. Continue to follow SC-S-21-13 for 0.8 miles. Arrive at Pee Dee Regional Center. Estimated time to accomplish the relocation of the consumers dependent on traffic conditions is from 2 hours, 45 minutes to 5 hours, 0 minutes.

Whitten Regional Center-28373 Hwy 76 E, Clinton SC

- Primary Route:

Head northwest on Miles Rd/SC-S-18-377 toward Braly Dr. for 0.4 miles. Turn right on Gahagan Rd/SC-S-18-339. Continue on Gahagan Rd. for 1.2 miles. Continue on E. 6th S. St. for 0.3 miles. Turn right at S. Main St/SC-165/US-17 Alt. Continue to follow S. Main St/US -17 Alt. for 2.8 miles. Turn left to merge onto I-26 W for 139 miles. Take exit 60 for SC-66 towards Joanna/Whitmire for 0.2 miles. Turn left at SC-66 for 3.7 miles. Turn right a N. Main St/US-76. Continue to follow US-76 for 3.8 miles. Arrive at Whitten Regional Center. Estimated time to accomplish the relocation of the consumers dependent on traffic conditions is from 2 hours, 30 minutes to 5 hours, 0 minutes.

- Secondary Route:

Head northwest on Miles Rd/SC-S-18-377 toward Braly Dr. for 1.0 miles. Turn right at Old Trolley Rd/SC-S-18-199/Trolley Rd. for 0.4 miles. Turn right at Bacons Bridge Rd/E. Carolina Ave/SC-165. Continue to follow E.

Carolina for 1.7 miles. Turn left a W. Richardson Ave/ SC-165 for 128 feet. Turn left at US-78 for 11.8 miles. Bear right at US-178. Continue to on US-178 for 37.5 miles. Continue on Charleston Hwy/US-178-BR. Continue to follow US-178-BR for 1.4 miles. Turn left at John C. Calhoun Dr/US-301/US-601. Continue to follow US-301/US-601 for 2.5 miles. Continue on Neeses Hwy/SC-4 for 13.6 miles. Turn right at Savannah Hwy/Us-321 for 0.4 miles. Turn left a Ninety Six Rd/SC-389. Continue to follow SC-389 for 13.6 miles. Bear right at Festival Trail Rd/SC-39. Continue to follow SC-39 for 2.8 miles. Turn right at SC-113/SC-302. Continue to follow SC-113 for 7.7 miles. Turn left a Fairview Rd/Us-178 for 11.6 miles. Bear right at SC-245 for 5.1 miles. Turn right at SC-391 for 7.8 miles. At the traffic circle, take the 2nd exit on Prosperity Hwy/SC-391 N. Continue to follow SC-391 N for 12.8 miles. Turn left a S. Main St/Sc-391 for 0.7 miles. Turn left at US-76/N Wheeler Ave. Continue to follow Us-76 for 25.6 miles. Arrive at Whitten Regional Center. Estimated time to accomplish the relocation of the consumers dependent on traffic conditions is from 4 hours, 0 minutes to 6 hours, 30 minutes.

MIDLANDS CENTER

All routes identified start from Midlands Center's address at 8301 Farrow Road, Columbia, SC. The routes are identified as follows:

- **Sheltering Facilities**

Other DDSN Regional Centers will be evacuation sites. These facilities are well equipped to serve Midlands Center's population in an evacuation emergency. Whitten Center is the preferred evacuation location. Pee Dee Regional Center and Coastal Center will serve as back up evacuation locations. A large scale evacuation could require utilization of all other facilities.

- **Evacuation Routes**

Evacuation via the Pisgah Church Road gate is recommended. Travel will be accomplished by interstate highway and/or major thoroughfare using vehicles available from the evacuation site(s). For evacuation to Whitten Center, the following route is preferred (if available): 1-20 West toward Augusta; 1-26 West toward Spartanburg; Exit 54 at Clinton and Highway 72 toward Clinton. Turn left on Springdale Road in Clinton, then left onto Highway 76 and then left into Whitten Center. The following is an alternate route: Pisgah Church Road to US-21 North. Turn left onto Koon Store Road. Turn right onto US-321 North. Turn left onto Camp Ground Road.

Turn right onto Monticello Road/SC-215. Turn left onto State Highway 213. Turn right onto US-176. Turn left onto SC-34. Merge onto I-26 toward Spartanburg, then exit 54 at Clinton and Highway 72 toward Clinton. Turn left on Springdale Road in Clinton, then left onto Highway 76 and then left into Whitten Center. The distance to Whitten Center is 65 miles with optimum driving time approximately one hour.

PEE DEE/SALEEBY CENTER

All routes identified start from Pee Dee Center's address at 714 East National Cemetery Road, Florence, SC, and Saleeby Center's address at 714 Lewellen Avenue, Hartsville, SC. The routes are identified as follows:

Pee Dee Center to Coastal Center

1. Start out going WEST on E NATIONAL CEMETERY RD/ SC-S-21-13 toward S GAILLARD ST/ SC-S-21-153. Continue to follow SC-S-21-13. 0.9 mi
 2. Turn RIGHT onto US-301/ US-52/ S IRBY ST. 0.7 mi
 3. Turn LEFT onto W PALMETTO ST/ US-76. 2.4 mi
 4. Turn RIGHT onto W DAVID H MCLEOD BLVD/ I-20 SPUR W. Continue to follow I-20 SPUR W. 2.1 mi
 5. Merge onto I-95 S via EXIT 141B toward SAVANNAH. 75.2 mi
 6. Merge onto I-26 E via EXIT 86A toward CHARLESTON. 34.8 mi
 7. Take the COLLEGE PK RD exit, EXIT 203, toward GOOSE CREEK/ LADSON. 0.3 mi
 8. Turn RIGHT onto COLLEGE PARK RD. 0.9 mi
 9. Turn RIGHT onto LADSON RD. 1.8 mi
 10. Turn RIGHT onto MILES RD/ JAMISON RD. 1.1 mi
 11. End at 9995 Miles-Jamison Road, Summerville, SC 29485
- Estimated Time: 1 hour 57 minutes; Estimated Distance: 120.22 miles

Alternate Route to Coastal Center

1. Start out going WEST on E NATIONAL CEMETERY RD toward S GAILLARD ST.
2. Turn LEFT onto S BARRINGER ST/US-52.
3. Keep RIGHT at the fork to go on US-52.
4. Turn SLIGHT RIGHT onto JAMES JONES AVE.
5. JAMES JONES AVE becomes US-52 E.
6. Turn RIGHT onto US-52/SC-261/MAIN ST. Continue to follow US-52.
7. Turn RIGHT onto COLONEL MAHAM DR.

8. Turn SLIGHT LEFT onto HIGHWAY 35/SC-35. Continue to follow SC-35.
9. Turn LEFT onto MANDELLA RD.
10. Turn RIGHT onto N HIGHWAY 52/US-52. Continue to follow US-52 S.
11. Turn RIGHT onto US-17 ALT/N LIVE OAK DR. Continue to follow US-17 ALT.
12. Turn LEFT onto COLLEGE PARK RD.
13. Turn RIGHT onto LADSON RD.
14. Turn RIGHT onto JAMISON RD.
15. End at 9995 Miles-Jamison Road, Summerville, SC 29485

Pee Dee Center to Midlands Center

1. Start out going WEST on E NATIONAL CEMETERY RD/ SC-S-21-13 toward S GAILLARD ST/ SC-S-21-153. Continue to follow SC-S-21-13. 0.9 mi
 2. Turn RIGHT onto US-301/ US-52/ S IRBY ST. 0.7 mi
 3. Turn LEFT onto W PALMETTO ST/ US-76. 2.4 mi
 4. Turn RIGHT onto W DAVID H MCLEOD BLVD/ I-20 SPUR W. Continue to follow I-20 SPUR W. 2.1 mi
 5. I-20 SPUR W becomes I-20 W. 65.2 mi
 6. Merge onto I-77 N via EXIT 76A toward CHARLOTTE. 2.8 mi
 7. Merge onto SC-555 S/ FARROW RD via EXIT 19. 2.1 mi
 8. End at 8301 Farrow Rd Columbia, SC 29203-3245
- Estimated Time: 1 hour 16 minutes; Estimated Distance: 76.26 miles

Alternate Route to Midlands Center

1. Start out going west on E National Cemetery Rd toward S Gaillard St. 0.57 miles
2. E National Cemetery Rd becomes Cherokee Rd. Then 2.35 miles
3. Cherokee Rd becomes Hoffmeyer Rd. Then 9.64 miles
4. Enter next roundabout and take the 2nd exit onto E Seven Pines St. Then 4.21 miles
5. Turn right onto Bethel Rd. Then 1.95 miles
6. Turn left onto E Lydia Hwy/SC-34. Continue to follow SC-34. Then 15.10 miles
7. Turn right onto W Church St/SC-34. Continue to follow SC-34. Then 20.57 miles
8. Turn left onto Jefferson Davis Hwy/US-1 S/SC-34. Continue to follow US-1 S. Then 23.81 miles
9. Turn right onto Rabon Rd. Then 1.97 miles

10. Turn left onto Farrow Rd/SC-555. Then 1.73 miles
Midlands Center, 8301 Farrow Rd, Columbia, SC, 8301 Farrow Rd is on the right.

Pee Dee Center to Whitten Center

1. Start out going WEST on E NATIONAL CEMETERY RD/ SC-S-21-13 toward S GAILLARD ST/ SC-S-21-153. Continue to follow SC-S-21-13. 0.9 mi
 2. Turn RIGHT onto US-301/ US-52/ S IRBY ST. 0.7 mi
 3. Turn LEFT onto W PALMETTO ST/ US-76. 2.4 mi
 4. Turn RIGHT onto W DAVID H MCLEOD BLVD/ I-20 SPUR W. Continue to follow I-20 SPUR W. 2.1 mi
 5. I-20 SPUR W becomes I-20 W. 77.0 mi
 6. Merge onto I-26 W via EXIT 64B toward SPARTANBURG. 53.6 mi
 7. Take the SC-72 exit, EXIT 54, toward CLINTON. 0.2 mi
 8. Turn LEFT onto SC-72. 1.3 mi
 9. Turn LEFT onto SPRINGDALE DR/ SC-56 TRUCK/ SC-P-3002. 1.7 mi
 10. Turn LEFT onto US-76. 0.6 mi
 11. End at 28373 Highway 76 E Clinton, SC 29325-5328
- Estimated Time: 2.0 hours 15 minutes; Estimated Distance: 140.46 miles

Alternate route to Whitten Center

1. Start out going west on E National Cemetery Rd toward S Gaillard St.
Then 0.57 miles
2. E National Cemetery Rd becomes Cherokee Rd. Then 2.35 miles
3. Cherokee Rd becomes Hoffmeyer Rd. Then 9.64 miles
4. Enter next roundabout and take the 2nd exit onto E Seven Pines St. Then 4.21 miles
5. Turn right onto Bethel Rd. Then 1.95 miles
6. Turn left onto E Lydia Hwy/SC-34. Continue to follow SC-34. Then 15.10 miles
7. Turn right onto W Church St/SC-34. Continue to follow SC-34. Then 20.57 miles
8. Turn left onto Jefferson Davis Hwy/US-1 S/SC-34. Continue to follow US-1 S/SC-34. Then 6.15 miles
9. Turn right onto Ridgeway Rd/SC-34. Continue to follow SC-34. Then 17.86 miles
10. Turn left onto W Church St/SC-34. Continue to follow W Church St.
Then 0.16 miles

11. Turn right onto N Coleman St/US-21 Conn S/SC-34 Conn. Then 0.78 miles
12. Turn slight left onto State Highway 34/SC-34. Then 7.67 miles
13. Turn right onto US Highway 321/US-321 N/SC-34. Continue to follow US-321 N/SC-34. Then 3.65 miles
14. Turn left onto Newberry Rd/SC-34. Continue to follow SC-34. Then 32.09 miles
15. Turn slight right onto Short Cut Rd. Then 0.69 miles
16. Turn left onto Mount Bethel Garmany Rd. Then 0.24 miles
17. Take the 1st right onto Whitener Rd. Then 1.06 miles
18. Turn right onto Wilson Rd/US-76 W. Continue to follow US-76 W. Then 18.27 miles

Saleeby Center to Coastal Center

1. Start out going WEST on LEWELLEN DR/ LEWELLEN AVE toward GANDY DR. 0.2 mi
 2. LEWELLEN DR/ LEWELLEN AVE becomes CURRIE DR. 0.2 mi
 3. Turn RIGHT onto W WASHINGTON ST. 0.4 mi
 4. Turn LEFT onto 14TH ST/ SC-S-16-102. 0.9 mi
 5. Turn LEFT onto SC-151. 1.5 mi
 6. Turn RIGHT onto US-15. 2.9 mi
 7. Stay STRAIGHT to go onto SC-403. 7.8 mi
 8. Turn LEFT onto US-401. 0.4 mi
 9. Merge onto I-20 E toward FLORENCE. 10.4 mi
 10. Merge onto I-95 S via EXIT 141B toward SAVANNAH. 75.1 mi
 11. Merge onto I-26 E via EXIT 86A toward CHARLESTON. 34.8 mi
 12. Take the COLLEGE PK RD exit, EXIT 203, toward GOOSE CREEK/LADSON. 0.3 mi
 13. Turn RIGHT onto COLLEGE PARK RD. 0.9 mi
 14. Turn RIGHT onto LADSON RD. 1.8 mi
 15. Turn RIGHT onto MILES RD/ JAMISON RD. 1.1 mi
 16. End at 9995 Miles-Jamison Road, Summerville, SC 29485
- Estimated Time: 2.0 hours 18 minutes; Estimated Distance: 138.70 miles

Alternate Route to Coastal Center

1. Start out going WEST on LEWELLEN DR/LEWELLEN AVE toward GANDY DR.
2. LEWELLEN DR/LEWELLEN AVE becomes CURRIE DR.
3. Turn RIGHT onto W WASHINGTON ST.
4. Turn LEFT onto 14TH ST/SC-S-16-102.

5. Turn SLIGHT RIGHT onto HIGH POINT RD/SC-S-16-65.
6. Stay STRAIGHT to go onto INDIAN BRANCH RD.
7. Stay STRAIGHT to go onto INDIAN BRANCH RD/SC-S-16-52.
8. Turn RIGHT onto US-15/SC-34.
9. Turn LEFT onto SANDY GROVE CHURCH RD/SC-S-31-39.
10. SANDY GROVE CHURCH RD/SC-S-31-39 becomes W LYNCHES RIVER RD.
11. Turn RIGHT onto US-401.
12. Turn LEFT onto SC-527/ELLIOT HWY. Continue to follow SC-527 N.
13. Turn RIGHT onto CECIL MC FADDEN RD/SC-S-14-104.
14. Turn RIGHT onto US-301.
15. Turn LEFT onto N BREWINGTON RD/SC-S-14-50.
16. Turn LEFT onto SC-261.
17. Turn RIGHT onto N BREWINGTON RD/SC-S-14-50.
18. Turn LEFT onto US-521.
19. Stay STRAIGHT to go onto SC-375.
20. Turn RIGHT onto US-52.
21. Turn RIGHT onto COLONEL MAHAM DR.
22. Turn SLIGHT LEFT onto HIGHWAY 35/SC-35. Continue to follow SC-35.
23. Turn LEFT onto MANDELLA RD.
24. Turn RIGHT onto N HIGHWAY 52/US-52. Continue to follow US-52 S.
25. Turn RIGHT onto US-17 ALT/N LIVE OAK DR. Continue to follow US-17 ALT.
26. Turn LEFT onto COLLEGE PARK RD.
27. Turn RIGHT onto LADSON RD.
28. Turn RIGHT onto JAMISON RD.
29. End at 9995 Miles-Jamison Road, Summerville, SC 29485

Saleeby Center to Midlands Center

1. Start out going WEST on LEWELLEN DR/ LEWELLEN AVE toward GANDY DR. 0.2 mi
2. LEWELLEN DR/ LEWELLEN AVE becomes CURRIE DR. 0.2 mi
3. Turn RIGHT onto W WASHINGTON ST. 0.4 mi
4. Turn LEFT onto 14TH ST/ SC-S-16-102. 0.9 mi
5. Turn LEFT onto SC-151. 1.5 mi
6. Turn RIGHT onto US-15. 2.9 mi
7. Turn RIGHT onto US-15/ SC-34. Continue to follow US-15 S. 13.7 mi
8. Merge onto I-20 W. 39.9 mi
9. Merge onto I-77 N via EXIT 76A toward CHARLOTTE. 2.8 mi

- 10. Merge onto SC-555 S/ FARROW RD via EXIT 19. 2.1 mi
 - 11. End at 8301 Farrow Rd Columbia, SC 29203-3245
- Estimated Time: 1 hour 15 minutes; Estimated Distance: 64.59 miles

Saleeby Center to Whitten Center

- 1. Start out going WEST on LEWELLEN DR/ LEWELLEN AVE toward GANDY DR. 0.2 mi
 - 2. LEWELLEN DR/ LEWELLEN AVE becomes CURRIE DR. 0.2 mi
 - 3. Turn RIGHT onto W WASHINGTON ST. 0.4 mi
 - 4. Turn LEFT onto 14TH ST/ SC-S-16-102. 0.9 mi
 - 5. Turn LEFT onto SC-151. 1.5 mi
 - 6. Turn RIGHT onto US-15. 2.9 mi
 - 7. Turn RIGHT onto US-15/ SC-34. Continue to follow US-15 S. 13.7 mi
 - 8. Merge onto I-20 W. 51.6 mi
 - 9. Merge onto I-26 W via EXIT 64B toward SPARTANBURG. 53.6 mi
 - 10. Take the SC-72 exit, EXIT 54, toward CLINTON. 0.2 mi
 - 11. Turn LEFT onto SC-72. 1.3 mi
 - 12. Turn LEFT onto SPRINGDALE DR/ SC-56 TRUCK/ SC-P-3002. 1.7 mi
 - 13. Turn LEFT onto US-76. 0.3 mi
 - 14. End at 28373 Highway 76 E Clinton, SC 29325-5328
- Estimated Time: 2.0 hours 13 minutes; Estimated Distance: 128.54 miles

WHITTEN CENTER

All routes identified start from Whitten Center’s address at 28373 Highway 76 East, Clinton, SC. The routes are identified as follows:

Emergency Local Shelters/Driving Directions

To Clinton YMCA, 100 YMCA Drive, Clinton

- 1. From WC, turn RIGHT onto US-76/Carolina Avenue 0.3 mi
- 2. Turn LEFT onto Springdale Road/Ring Road (traffic light) 1.4 mi
- 3. Turn RIGHT onto Highway 56 W (by Arthur Bank) 443 ft
- 4. Take first LEFT onto YMCA Drive (by Sterling Bank) 0.1 mi
- 5. YMCA will be on your left

To Clinton National Guard Armory, 18040 Highway 72 E, Clinton

- 1. From WC, turn RIGHT onto US-76/Carolina Avenue 0.3 mi
- 2. Turn RIGHT onto Springdale Road/Ring Road (traffic light) 1.7 mi
- 3. Turn RIGHT onto Highway 72 E 279 ft
- 4. Armory will be on your right, corner of Springdale and Highway 72

To Laurens National Guard Armory, 4171 Torrington Road, Laurens

1. From WC, turn RIGHT onto US-76/Carolina Avenue 3.2 mi
2. Turn RIGHT onto State Road S-30-46 (by Hickory Point Exxon) 3.4 mi
3. Continue on to Torrington Road, S-30-53 0.1 mi

Whitten Center to Midlands Center

1. Start out going northwest on Highway 76/US-76 W toward Old Colony Rd.
Then 0.26 miles
2. Take the 2nd right onto Springdale Dr.
Springdale Dr is 0.2 miles past Old Colony Rd; If you reach Missallie Dr you've gone about 0.6 miles too far
Then 1.70 miles
3. Turn right onto Highway 72/SC-72.
Highway 72 is 0.2 miles past Baldwin Circle Ext; If you reach McSwain Dr you've gone about 0.4 miles too far
Then 1.09 miles
4. Merge onto I-26 E toward Columbia.
Then 53.52 miles
5. Merge onto I-20 E via EXIT 107B toward Florence.
Then 8.30 miles
6. Take the Farrow Rd/SC-555 exit, EXIT 72.
Then 0.27 miles
7. Keep left to take the ramp toward MIDLANDS TECH COL/MENTAL HEALTH FACILITIES.
Then 0.06 miles
8. Turn left onto Farrow Rd/SC-555.
Then 1.15 miles
9. 8301 Farrow Rd, Columbia, SC 29203-3245 is on the left.

Alternate Route to Midlands Center

1. Start out going northwest on Highway 76/US-76 W toward Old Colony Rd.
Then 0.02 miles
2. Take the 1st right onto Old Colony Rd.
If you reach Springdale Dr you've gone about 0.2 miles too far
Then 0.14 miles
3. Turn sharp right to stay on Old Colony Rd.
If you reach 2nd Ave you've gone a little too far
Then 0.14 miles
4. Turn left onto Highway 76/US-76 E. Continue to follow US-76 E.

Then 19.81 miles

5. Turn left onto Winnsboro Rd/SC-34. Continue to follow SC-34.

SC-34 is just past Bay St; If you reach Main St you've gone about 0.1 miles too far

Then 6.70 miles

6. Turn right onto US Highway 176/US-176 E.

US Highway 176 is 0.8 miles past Cummings Dr; If you reach Rutherford Rd you've gone about 0.3 miles too far

Then 11.01 miles

7. Turn left onto Parr Rd/SC-213. Continue to follow SC-213.

SC-213 is 0.1 miles past Hope Station Rd; If you reach Mayer Rd you've gone about 1.2 miles too far

Then 5.51 miles

8. Turn right onto State Highway 215/SC-215. Continue to follow SC-215.

If you are on St Barnabas Rd and reach Charman Blvd you've gone about 0.1 miles too far

Then 14.28 miles

9. Turn left onto Camp Ground Rd.

Camp Ground Rd is 0.3 miles past Kinsler Rd; If you reach Romeo Johnson Rd you've gone about 1 mile too far

Then 3.82 miles

10. Turn right onto Winnsboro Rd/US-321 S.

Then 1.81 miles

11. Turn left onto Koon Store Rd.

Koon Store Rd is 0.8 miles past Rose Cottage Ln; If you are on Fairfield Rd and reach Dubard Boyle Rd you've gone about 0.1 miles too far

Then 2.05 miles

12. Turn right onto Wilson Blvd/US-21 S.

Then 1.54 miles

13. Turn left onto Pisgah Church Rd.

Pisgah Church Rd is just past Nubin Ridge Rd; If you reach Hastings Point Dr you've gone about 0.3 miles too far

Then 1.14 miles

14. Turn right onto Farrow Rd/SC-555.

Farrow Rd is 0.1 miles past Powell Rd

Then 0.56 miles

15. 8301 Farrow Rd, Columbia, SC 29203-3245 is on the right.

Whitten Center to Pee Dee Center

1. Start out going northwest on Highway 76/US-76 W toward Old Colony Rd.

Then 0.26 miles

2. Take the 2nd right onto Springdale Dr.
Springdale Dr is 0.2 miles past Old Colony Rd; If you reach Missallie Dr you've gone about 0.6 miles too far
Then 1.70 miles
3. Turn right onto Highway 72/SC-72.
Highway 72 is 0.2 miles past Baldwin Circle Ext; If you reach McSwain Dr you've gone about 0.4 miles too far
Then 1.09 miles
4. Merge onto I-26 E toward Columbia.
Then 53.52 miles
5. Merge onto I-20 E via EXIT 107B toward Florence.
Then 77.64 miles
6. I-20 E becomes David H McLeod Blvd.
Then 2.14 miles
7. Turn left onto W Palmetto St/US-76 E.
Then 0.32 miles
8. Turn slight right onto Cherokee Rd.
Cherokee Rd is just past S Cashua Dr; If you are on W Palmetto St and reach Rainbow Dr you've gone about 0.1 miles too far
Then 2.35 miles
9. Cherokee Rd becomes E National Cemetery Rd.
Then 0.57 miles
10. 714 E National Cemetery Rd, Florence, SC 29506-3230 is on the right.

Alternate Route to Pee Dee Center

1. Start out going northwest on Highway 76/US-76 W toward Old Colony Rd.
Then 0.26 miles
2. Take the 2nd right onto Springdale Dr.
Springdale Dr is 0.2 miles past Old Colony Rd; If you reach Missallie Dr you've gone about 0.6 miles too far
Then 1.70 miles
3. Turn right onto Highway 72/SC-72.
Highway 72 is 0.2 miles past Baldwin Circle Ext; If you reach McSwain Dr you've gone about 0.4 miles too far
Then 1.09 miles
4. Merge onto I-26 E toward Columbia.
Then 20.20 miles
5. Take the SC-34 exit, EXIT 74, toward Newberry/Winnsboro.
Then 0.17 miles
6. Turn left onto SC Highway 34/SC-34. Continue to follow SC-34.

If you reach I-26 E you've gone about 0.1 miles too far

Then 31.49 miles

7. Turn right onto US Highway 321 Byp/US-321 S/SC-34. Continue to follow US-321 S/SC-34.

If you reach Evans St you've gone about 0.5 miles too far

Then 3.58 miles

8. Turn left onto State Highway 34/SC-34. Continue to follow SC-34.

Then 8.61 miles

9. Turn left onto W Church St/SC-34.

W Church St is 0.1 miles past Thomas St; If you are on S Dogwood Ave and reach W 3Rd St you've gone about 0.1 miles too far

Then 0.06 miles

10. Take the 1st right onto S Palmer St/US-21 S/SC-34. Continue to follow SC-34.

If you are on Longtown Rd and reach S Means St you've gone a little too far

Then 17.88 miles

11. Turn left onto Highway 1/US-1 N/US-601 N/SC-34. Continue to follow US-1 N/SC-34.

US-1 N is just past Highway 1; If you are on Ward Rd and reach The Commons you've gone about 0.1 miles too far

Then 6.10 miles

12. Turn slight right onto Bishopville Hwy/SC-34. Continue to follow SC-34.
SC-34 is just past Hasty Rd

Then 20.59 miles

13. Stay straight to go onto E Church St/SC-341. Continue to follow SC-341.

Then 3.29 miles

14. Turn left to take the I-20 E ramp toward Florence.

0.3 miles past Frontage Rd; If you reach Jesmar Ln you've gone about 0.1 miles too far

Then 0.01 miles

15. Merge onto I-20 E.

Then 21.43 miles

16. I-20 E becomes David H McLeod Blvd.

Then 2.14 miles

17. Turn left onto W Palmetto St/US-76 E.

Then 0.32 miles

18. Turn slight right onto Cherokee Rd.

Cherokee Rd is just past S Cashua Dr; If you are on W Palmetto St and reach Rainbow Dr you've gone about 0.1 miles too far

Then 2.35 miles

19. Cherokee Rd becomes E National Cemetery Rd.

Then 0.57 miles

20.714 E National Cemetery Rd, Florence, SC 29506-3230 is on the right.

Whitten Center to Saleeby Center

1. Start out going northwest on Highway 76/US-76 W toward Old Colony Rd.

Then 0.26 miles

2. Take the 2nd right onto Springdale Dr.

Springdale Dr is 0.2 miles past Old Colony Rd; If you reach Missallie Dr you've gone about 0.6 miles too far

Then 1.70 miles

3. Turn right onto Highway 72/SC-72.

Highway 72 is 0.2 miles past Baldwin Circle Ext; If you reach McSwain Dr you've gone about 0.4 miles too far

Then 1.09 miles

4. Merge onto I-26 E toward Columbia.

Then 53.52 miles

5. Merge onto I-20 E via EXIT 107B toward Florence.

Then 52.26 miles

6. Take the US-15 exit, EXIT 116, toward Bishopville/Sumter.

Then 0.18 miles

7. Merge onto US-15 N toward Bishopville/Cotton Museum/Hartsville/I-20 Industrial Center.

Then 13.91 miles

8. Turn left onto S 5th St/US-15 N. Continue to follow S 5th St.

S 5th St is 0.6 miles past Melwood Rd; If you are on E Lydia Hwy and reach Lotus Cir you've gone about 0.1 miles too far

Then 5.63 miles

9. Turn left onto W Carolina Ave/SC-151 Bus.

W Carolina Ave is just past Marlboro Ave; Hartsville Family YMCA is on the corner; If you are on N 5th St and reach Mantissa Row you've gone a little too far

Then 0.96 miles

10. Turn left onto S 11th St.

S 11th St is just past Wren St; If you reach Gandy Dr you've gone about 0.1 miles too far

Then 0.48 miles

11. Turn right onto Lewellen Ave.

Then 0.07 miles

12. 714 Lewellen Ave, Hartsville, SC 29550-5236 is on the right.

Alternate Route to Saleeby Center

1. Start out going northwest on Highway 76/US-76 W toward Old Colony Rd.
Then 0.26 miles
2. Take the 2nd right onto Springdale Dr.
Springdale Dr is 0.2 miles past Old Colony Rd; If you reach Missallie Dr you've gone about 0.6 miles too far
Then 1.70 miles
3. Turn right onto Highway 72/SC-72.
Highway 72 is 0.2 miles past Baldwin Circle Ext; If you reach McSwain Dr you've gone about 0.4 miles too far
Then 1.09 miles
4. Merge onto I-26 E toward Columbia.
Then 20.20 miles
5. Take the SC-34 exit, EXIT 74, toward Newberry/Winnsboro.
Then 0.17 miles
6. Turn left onto SC Highway 34/SC-34. Continue to follow SC-34.
If you reach I-26 E you've gone about 0.1 miles too far
Then 31.49 miles
7. Turn right onto US Highway 321 Byp/US-321 S/SC-34. Continue to follow US-321 S/SC-34.
If you reach Evans St you've gone about 0.5 miles too far
Then 3.58 miles
8. Turn left onto State Highway 34/SC-34.
Then 7.76 miles
9. Turn slight right onto N Coleman St/US-21 Conn N/SC-34 Conn.
Then 0.78 miles
10. Take the 2nd left onto W Church St/SC-34 Conn. Continue to follow W Church St.
W Church St is 0.1 miles past Peach St; If you are on S Coleman St and reach W 3rd St you've gone about 0.1 miles too far
Then 0.16 miles
11. Turn right onto S Palmer St/US-21 S/SC-34. Continue to follow SC-34.
SC-34 is just past S Dogwood Ave; If you are on Longtown Rd and reach S Means St you've gone a little too far
Then 17.88 miles
12. Turn left onto Highway 1/US-1 N/US-601 N/SC-34. Continue to follow US-1 N.
US-1 N is just past Highway 1; If you are on Ward Rd and reach The Commons you've gone about 0.1 miles too far
Then 7.85 miles
13. Turn slight right onto Old Stagecoach Rd.
Then 18.47 miles

14. Old Stagecoach Rd becomes W Old Camden Rd.
Then 6.91 miles
15. Turn right onto W Bobo Newsom Hwy/SC-151.
If you reach Jean Ln you've gone a little too far
Then 2.74 miles
16. Turn slight left onto W Carolina Ave/SC-151 Bus. Pass through 1 roundabout.
W Carolina Ave is 0.1 miles past Westover Dr; If you are on W Bobo Newsom Hwy and reach Forest Hills Dr you've gone about 0.2 miles too far
Then 2.44 miles
17. Turn right onto S 11th St.
S 11th St is 0.1 miles past Gandy Dr; If you reach Wren St you've gone a little too far
Then 0.48 miles
18. Turn right onto Lewellen Ave.
Then 0.07 miles
19. 714 Lewellen Ave, Hartsville, SC 29550-5236 is on the right.

Whitten Center to Coastal Center

1. Start out going northwest on Highway 76/US-76 W toward Old Colony Rd.
Then 0.26 miles
2. Take the 2nd right onto Springdale Dr.
Springdale Dr is 0.2 miles past Old Colony Rd; If you reach Missallie Dr you've gone about 0.6 miles too far
Then 1.70 miles
3. Turn right onto Highway 72/SC-72.
Highway 72 is 0.2 miles past Baldwin Circle Ext; If you reach McSwain Dr you've gone about 0.4 miles too far
Then 1.09 miles
4. Merge onto I-26 E toward Columbia.
Then 145.11 miles
5. Merge onto N Main St/US-17 Alt S via EXIT 199A toward Summerville.
Then 0.85 miles
6. Turn left onto Berlin G Myers Pkwy.
Then 1.99 miles
7. Turn left onto E 6th South St.
E 6th South St is 0.9 miles past E 3rd North St; If you reach E Richland St you've gone about 0.4 miles too far
Then 0.05 miles
8. E 6th South St becomes Gahagan Rd.
Then 1.13 miles

9. Turn left onto Miles Rd. Pass through 1 roundabout.
Miles Rd is 0.1 miles past Bayberry Run Rd; If you reach the end of Dewees Ln
you've gone about 0.1 miles too far
Then 1.35 miles
10. 9995 Miles-Jamison Road, Summerville, SC 29485 is on the right.

Alternate Route to Coastal Center

1. Start out going northwest on Highway 76/US-76 W toward Old Colony Rd.
Then 0.27 miles
2. Turn left onto Springdale Dr.
If you reach Missallie Dr you've gone about 0.6 miles too far
Then 1.41 miles
3. Turn left onto Jacobs Hwy/SC-56. Continue to follow SC-56.
SC-56 is 0.7 miles past E Maple St; If you reach S Broad St you've gone about 0.3
miles too far
Then 18.73 miles
4. Turn slight left onto SC Highway 39/SC-39. Continue to follow SC-39. SC-39 is
0.9 miles past Long Sumpit Rd
Then 15.32 miles
5. Turn left onto Greenwood Hwy/US-178 E/SC-39.
Greenwood Hwy is just past Pitts Dr; If you reach Matthews Dr you've gone about
0.1 miles too far
Then 0.08 miles
6. Take the 1st right onto N Main St/US-178 E/SC-121/SC-39.
If you are on Travis Ave and reach N Jennings St you've gone about 0.1 miles too
far
Then 0.56 miles
7. Turn left onto Batesburg Hwy/US-178 E/SC-39. Continue to follow US-178 E.
US-178 E is just past Bonham Rd; If you reach Etheredge Rd you've gone about
0.2 miles too far
Then 14.97 miles
8. Turn left onto W Church St/US-178 E/SC-23.
W Church St is just past Gunter St; If you are on Granite St and reach Lexington
Ave you've gone a little too far
Then 0.10 miles
9. Take the 3rd right onto N Pine St/US-178 E/SC-391. Continue to follow US-
178 E.
US-178 E is just past N Rutland; If you reach Fox St you've gone a little too far
Then 56.10 miles
10. Turn left onto Five Chop Rd/US-301 S.

Five Chop Rd is 0.3 miles past Whittaker Pkwy; If you are on Joe S Jeffords Hwy and reach Houser St you've gone about 0.2 miles too far

Then 6.13 miles

11. Merge onto I-26 E toward Charleston.

Then 33.07 miles

12. Take the SC-27 exit, EXIT 187, toward Ridgeville.

Then 0.24 miles

13. Turn right onto Ridgeville Rd/SC-27.

If you reach I-26 E you've gone about 0.2 miles too far

Then 1.09 miles

14. Turn left onto Highway 78/US-78 E/SC-27. Continue to follow US-78 E.

Then 8.97 miles

15. Turn slight right onto W Richardson Ave/SC-165. Continue to follow W Richardson Ave.

Then 2.00 miles

16. Turn right onto S Gum St.

S Gum St is just past S Magnolia St; If you reach Challedon Dr you've gone about 0.2 miles too far

Then 0.49 miles

17. Take the 1st left onto E 6th South St.

E 6th South St is just past E 5th South St; If you reach Joyce Ln you've gone a little too far

Then 0.11 miles

18. E 6th South St becomes Gahagan Rd.

Then 1.13 miles

19. Turn left onto Miles Rd. Pass through 1 roundabout.

Miles Rd is 0.1 miles past Bayberry Run Rd; If you reach the end of Dewees Ln you've gone about 0.1 miles too far

Then 1.36 miles

20. Miles Rd becomes Jamison Rd.

Then 0.09 miles

21. 9995 Jamison Rd, MILES, Ladson, SC 29456-6901 is on the right.

➤ Appendix E (Arrangement with other facilities):
COASTAL CENTER

MEMORANDUM OF AGREEMENT

Between

SALEEBY, PEE DEE AND COASTAL CENTER

for

ALTERNATIVE SHELTER

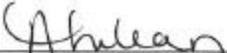
In the event of a natural or man-made disaster in Dorchester, Florence, or Darlington Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential services for persons served at Saleeby Center, Pee Dee Center, and Coastal Center.

Coastal Center agrees to serve as an evacuation site providing 50 emergency beds and support transportation for Pee Dee or Saleeby Center services recipients when, and if, its residences become untenable due to a natural or man-made disaster. Likewise, should an emergency evacuation be necessary for Coastal Center, Pee Dee/Saleeby Center agrees to provide shelter for 50 beds and support transportation for Coastal service recipients.

Each agency will provide the requisite number of staff personnel to escort service recipients to the designated emergency facilities. Further, it is agreed that staff will remain in the facility-receiving evacuees in order to supplement the host agency staff and continue individual training programs to the extent feasible. Each agency agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Coastal Center Facility Director or designee will be the point of contact and present at Pee Dee or Saleeby Center to supervise/coordinate necessary actions. If Pee Dee or Saleeby Center places residential service recipients at Coastal Center, the Saleeby and Pee Dee Centers' Administrator, Program Services, or designee, will be the point of contact and present at Coastal Center for supervision coordinate on.

The using agency will reimburse the host agency for additional expenses for food; lodging and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

The Memorandum of Agreement being renewed effective **April 1, 2020** and will be renewed annually. It may be rescinded by either party for any reason. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.

 3.17.20

Amy McLean Date
Facility Administrator
Pee Dee Regional Center, SCDDSN
714 National Cemetery Rd.
Florence, SC 29501

 3-19-2020

Tommy McDaniel Date
Facility Administrator
Coastal Center, SCDDSN
9995 Miles-Jamison Rd.
Summerville, SC 29485

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

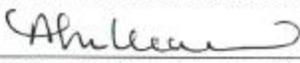
SCDDSN – Pee Dee Center – Mulberry Park
Facility Name

MR16-141
License Number

714 National Cemetery Road
Street Address

Florence 25506
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

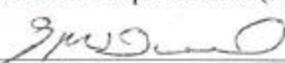
SCDDSN – Coastal Center
Sheltering Facility Name

9995 Miles-Jamison Rd.
Street Address

Mailing Address (if different from above)

Summerville, S. C. 29485
City, State and Zip Code

Tommy McDaniel
Authorized Representative (Please print)


Authorized Representative Signature

3-19-2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes ✓ No

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SCDDSN White Center, PO Box 239, Clinton, SC 29325
SCDDSN Midlands Center, 8301 Farrow Rd, Columbia, SC 29203

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

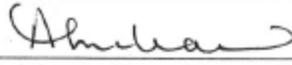
SCDDSN – Pee Dee Center – Pecan Lane
Facility Name

MR16-119
License Number

714 National Cemetery Road
Street Address

Florence 29506
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

SCDDSN – Coastal Center
Sheltering Facility Name

9995 Miles-Jamison Rd.
Street Address

Mailing Address (if different from above)

Summerville, S. C. 29485
City, State and Zip Code

Tommy McDaniel
Authorized Representative (Please print)


Authorized Representative Signature

3-17-2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes √ No

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SCDDSN Whitten Center, PO Box 239, Clinton, SC 29325
SCDDSN Midlands Center, 8301 Farrow Rd, Columbia, SC 29203

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

To Be Completed by Sheltering Facility

SCDDSN – Thad E. Saleeby Center
Facility Name

SCDDSN – Coastal Center
Sheltering Facility Name

MR16-341
License Number

9995 Miles-Jamison Rd.
Street Address

714 Lewellen Avenue
Street Address

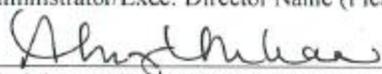
Mailing Address (if different from above)

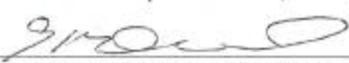
Hartsville 29550
City and Zip Code

Summerville, S. C. 29485
City, State and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)

Tommy McDaniel
Authorized Representative (Please print)


Administrator/Exec. Director Signature


Authorized Representative Signature

3-17-2020
Date

3-19-2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes No

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SCDDSN Whitten Center, PO Box 239, Clinton, SC 29325
SCDDSN Midlands Center, 8301 Farrow Rd, Columbia, SC 29203

MEMORANDUM OF AGREEMENT

BETWEEN

SALEEBY, PEE DEE AND COASTAL CENTER

FOR

ALTERNATIVE SHELTER AND TRANSPORTATION

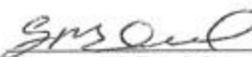
In the event of a natural or man-made disaster in either Dorchester, Florence, or Darlington Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Saleeby Center, Pee Dee Center and Coastal Center.

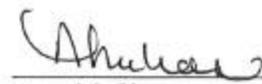
Pee Dee Center or Saleeby Center agrees to provide 50 emergency beds and support transportation for Coastal Center service recipients when, and if, its residences become untenable due to natural or man-made disasters. Likewise, should Pee Dee Center or Saleeby Center need emergency beds because of a similar disaster, Coastal Center will provide 50 emergency beds and support transportation for Pee Dee Center or Saleeby Center.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facility. Further, it is agreed that staff will remain at the facility receiving evacuees in order to supplement the host facility's staff and to continue individual training programs to the extent feasible. Each facility agrees to provide sufficient transportation for its service recipients while they remain in the host facility's area. Each center's Facility Administrative, or a designee, will be the point of contact and will be present at the host facility's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host facility for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.

 3-10-2020
Tommy McDaniel Date
Facility Administrator
Coastal Center, SCDDSN
9995 Jamison Road
Summerville, SC 29485
843-873-5750

 3.17.2020
Amy McClean Date
Facility Administrator
Pee Dee Center, SCDDSN
714 National Cemetery Road
Florence, SC 29506
843-664-2635

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

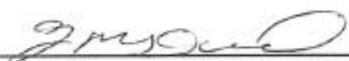
SC DDSN Coastal Center
Facility Name

Mr-16-0310 and MR 16-0342
License Number

9995 Jamison Road
Street Address

Summerville, SC 29485
City and Zip Code

Tommy McDaniel
Administrator/Exec. Director Name (Please Print)


Administrator Exec. Director Signature

3-10-2020
Date

To Be Completed by Sheltering Facility

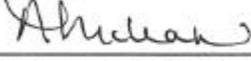
SC DDSN Pee Dee Center – Mulberry Park
Sheltering Facility Name

714 National Cemetery Road
Street Address

Mailing Address (if different from above)

Florence, SC 29506
City, State and Zip Code

Amy McClean
Authorized Representative (Please print)


Authorized Representative Signature

3.17.2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes: XXX No:

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.
SC DDSN Pee Dee Center, 713 National Cemetery Road, Florence SC 29502-3209
SC DDSN Midlands Center, 8301 Farrow Road, Columbia, SC 29203
SC DDSN Whitten Center, P O Box 239, Clinton SC 29325

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SC DDSN Coastal Center
Facility Name

Mr-16-0310 and MR 16-0342
License Number

9995 Jamison Road
Street Address

Summerville, SC 29485
City and Zip Code

Tommy McDaniel
Administrator/Exec. Director Name (Please Print)


Administrator Exec. Director Signature

3-10-2020
Date

To Be Completed by Sheltering Facility

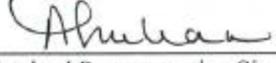
SC DDSN Thad E. Saleeby Center
Sheltering Facility Name

714 Lewellen Avenue
Street Address

Mailing Address (if different from above)

Hartsville, SC 29550
City, State and Zip Code

Amy McClean
Authorized Representative (Please print)


Authorized Representative Signature

3.17.2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes: XXX No:

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.
SC DDSN Pee Dee Center, 713 National Cemetery Road, Florence SC 29502-3209
SC DDSN Midlands Center, 8301 Farrow Road, Columbia, SC 29203
SC DDSN Whitten Center, P O Box 239, Clinton SC 29325

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SC DDSN Whitten Center Central Square

Facility Name

MR-16-0411

License Number

PO Box 239

Street Address

Clinton SC, 29325

City and Zip Code

Randy Davis

Administrator/Exec. Director Name (Please print)

Randy Davis

Administrator/Exec. Director Signature

3/10/20

Date

To Be Completed by Sheltering Facility

SC DDSN Coastal Center

Sheltering Facility Name

9995 Jamison Rd.

Street Address

Mailing Address (if different from above)

Summerville, SC 29845

City, State and Zip Code

Tommy McDaniel

Authorized Representative (Please print)

Tommy McDaniel

Authorized Representative Signature

3-9-2020

Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Pee Dee Center, 714 National Cemetery Rd., Florence SC 29502-3209

SC DDSN Midlands Center, 8301 Farrow Rd. Columbia, SC 29203

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

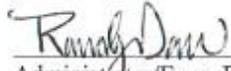
SC DDSN Whitten Center Campus
Facility Name

MR-16-0164
License Number

PO Box 239
Street Address

Clinton SC, 29325
City and Zip Code

Randy Davis
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3/6/20
Date

To Be Completed by Sheltering Facility

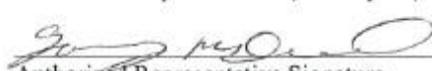
SC DDSN Coastal Center
Sheltering Facility Name

9995 Jamison Rd.
Street Address

Mailing Address (if different from above)

Summerville, SC 29845
City, State and Zip Code

Tommy McDaniel
Authorized Representative (Please print)


Authorized Representative Signature

3-9-2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Pee Dee Center, 714 National Cemetery Rd., Florence SC 29502-3209

SC DDSN Midlands Center, 8301 Farrow Rd. Columbia, SC 29203

MEMORANDUM OF AGREEMENT
BETWEEN
WHITTEN CENTER AND COASTAL CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION

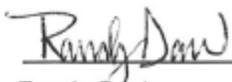
In the event of a natural or man-made disaster in Laurens or Dorchester Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Whitten Center and Coastal Center.

Whitten Center agrees to serve as an evacuation site for Coastal Center providing emergency shelter, sleeping accommodations and food for 60 persons when and if, Coastal Center becomes untenable due to a natural or man-made disaster. Likewise, should an emergency evacuation be necessary at Whitten Center, Coastal Center agrees to provide shelter, sleeping accommodations, and food for 50 Whitten Center service recipients.

Each facility will provide the requisite number of staff to escort service recipients to the designated emergency facility. Host facility will assist the evacuating facility with transportation if needed. It is agreed that staff will remain at the facility receiving evacuees in order to supplement the host facility's staff and to continue individual training programs to the extent feasible. Each facility agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's Facility Administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

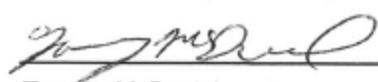
The evacuating facility will reimburse the host facility for expenses incurred for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Randy Davis
Facility Administrator
Whitten Center, SCDDSN
Hwy. 76 E. 8301 Farrow Rd
Clinton, SC 29325
(864) 833-2733

3/10/20
Date



Tommy McDaniel
Facility Administrator
Coastal Center, SCDDSN
9995 Jamison Rd.
Summerville, SC 29485
(843) 873-5750

3-9-2020
Date

MEMORANDUM OF AGREEMENT
BETWEEN
WHITTEN CENTER AND COASTAL CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION

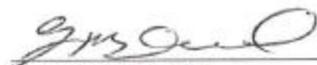
In the event of a natural or man-made disaster in either Laurens or Dorchester County, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Whitten Center and Coastal Center.

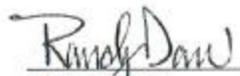
Whitten Center agrees to serve as an evacuation site for Coastal Center providing emergency shelter, sleeping accommodations and food for 60 persons when and if, Coastal Center residences become untenable due to a natural or man-made disaster. Likewise, should an emergency evacuation be necessary at Whitten Center, Coastal Center agrees to provide shelter, sleeping accommodations, and food for 50 Whitten Center service recipients.

Each facility will provide the requisite number of staff to escort service recipients to the designated emergency facility. Host facility will assist the evacuating facility with transportation if needed. It is agreed that staff will remain at the facility receiving evacuees in order to supplement the host facility's staff and to continue individual training programs to the extent feasible. Each facility agrees to provide sufficient transportation for its service recipients while they remain in the host facility's area. Each center's Facility Administrative, or a designee, will be the point of contact and will be present at the host facility's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host facility for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.

 3-10-2020
Tommy McDaniel Date
Facility Administrator
Coastal Center, SCDDSN
9995 Jamison Road
Summerville, SC 29485
843-873-5750

 3/12/20
Randy Davis Date
Facility Administrator
Whitten Center, SCDDSN
28373 Hwy 76 E
Clinton, SC 29325
864-938-3433

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SC DDSN Coastal Center
Facility Name

MR 16-0310 and MR 16-0342
License Number

9995 Jamison Road
Street Address

Summerville, SC 29485
City and Zip Code

Tommy McDaniel
Administrator/Exec. Director Name (Please Print)


Administrator Exec. Director Signature

3-10-2020
Date

To Be Completed by Sheltering Facility

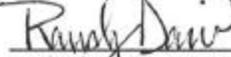
SC DDSN Whitten Center – Campus Area
Sheltering Facility Name

28373 Hwy 76 E
Street Address

Mailing Address (if different from above)

Clinton, SC 29325
City, State and Zip Code

Randy Davis
Authorized Representative (Please print)


Authorized Representative Signature

3/12/20
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes: XXX No:

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.
SC DDSN Pee Dee Center, 713 National Cemetery Road, Florence SC 29502-3209
SC DDSN Midlands Center, 8301 Farrow Road, Columbia, SC 29203
SC DDSN Whitten Center, P O Box 239, Clinton SC 29325

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

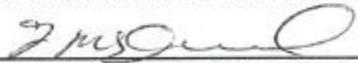
SC DDSN Coastal Center
Facility Name

Mr-16-0310 and MR 16-0342
License Number

9995 Jamison Road
Street Address

Summerville, SC 29485
City and Zip Code

Tommy McDaniel
Administrator/Exec. Director Name (Please Print)


Administrator Exec. Director Signature

3-10-2020
Date

To Be Completed by Sheltering Facility

SC DDSN Whitten Center – Central Square
Sheltering Facility Name

28373 Hwy 76 E
Street Address

Mailing Address (if different from above)

Clinton, SC 29325
City, State and Zip Code

Randy Davis
Authorized Representative (Please print)


Authorized Representative Signature

3/12/20
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes: XXX No:

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.
SC DDSN Pee Dee Center, 713 National Cemetery Road, Florence SC 29502-3209
SC DDSN Midlands Center, 8301 Farrow Road, Columbia, SC 29203
SC DDSN Whitten Center, P O Box 239, Clinton SC 29325

MEMORANDUM OF AGREEMENT
BETWEEN
MIDLANDS CENTER AND COASTAL CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION

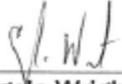
In the event of a natural or man made disaster in either Richland or Dorchester County, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Midlands Center or Coastal Center.

Midlands Center agrees to serve as an evacuation site providing emergency shelter, beds, and food for 100 persons from Coastal Center when and if, its residences become untenable due to a natural or man made disaster. Likewise, should Midlands Center need emergency beds because of a similar disaster, Coastal Center will provide 50 emergency beds for Midlands Center.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facility. Further, it is agreed that staff will remain in the facility receiving evacuees in order to supplement the host agency's staff and to continue individual training programs to the extent feasible. Each agency agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The evacuating agency will reimburse the host agency for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. It may be rescinded by either party for any reason. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Angela Wright
Facility Administrator

DDSN Midlands Center
8301 Farrow Rd
Columbia, SC 29203
(803) 935-7500

3/2/2020

Date



Tommy McDaniel
Facility Administrator

DDSN Coastal Center
9995 Jamison RD
Ladson SC 29456
(843) 873- 5750

3-9-2020

Date

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SCDDSN Midlands Center

Facility Name

MR-16-0103

License Number

8301 Farrow Road

Street Address

Columbia SC 29203

City and Zip Code

Angela Wright

Administrator/Exec. Director Name (Please Print)

Administrator/Exec. Director Signature

Date

A. Wright
3/2/2020

To Be Completed by Sheltering Facility

SCDDSN Coastal Center

Sheltering Facility Name

9995 Jamison Road

Street Address

Mailing Address (if different from above)

Summerville SC 29845

City and Zip Code

Tommy McDaniel

Authorized Representative (Please Print)

Authorized Representative Signature

Date

Tommy McDaniel
3-9-2020

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Pee Dee Center, 714 National Cemetery Rd., Florence SC 29502-3209

SC DDSN Whitten Center, PO box 239, Clinton SC 29325

MEMORANDUM OF AGREEMENT
BETWEEN
MIDLANDS CENTER AND COASTAL CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION

In the event of a natural or man-made disaster in either Richland or Dorchester County, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Midlands Center and Coastal Center.

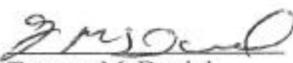
Midlands Center agrees to serve as an evacuation site for Coastal Center providing emergency shelter, sleeping accommodations and food for 100 persons when and if, Coastal Center residences become untenable due to a natural or man-made disaster. Likewise, should an emergency evacuation be necessary at Midlands Center, Coastal Center agrees to provide 50 emergency beds for Midlands Center.

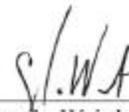
Each facility will provide the requisite number of staff to escort service recipients to the designated emergency facility. Further, it is agreed that staff will remain in the facility receiving evacuees in order to supplement the host agency's staff and to coordinate emergency services to the extent feasible. Each agrees to provide sufficient staff to provide administrative, or supervisory, or other support services at the host facility's location to supervise/coordinate necessary actions.

CC copy

The evacuating facility will reimburse the host facility for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.

 3/10/2020
Tommy McDaniel Date
Facility Administrator
Coastal Center, SCDDSN
9995 Jamison Road
Summerville, SC 29485
843-873-5750

 3/19/2020
Angela Wright Date
Facility Administrator
Midlands Center, SCDDSN
8301 Farrow road
Columbia, SC 29203
803-935-7500

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

To Be Completed by Sheltering Facility

SC DDSN Coastal Center
Facility Name

SC DDSN Midlands Center
Sheltering Facility Name

MR-16-0310 and MR 16-0342
License Number

8301 Farrow Road
Street Address

9995 Jamison Road
Street Address

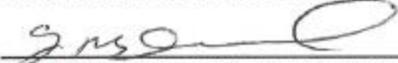
Mailing Address (if different from above)

Summerville, SC 29485
City and Zip Code

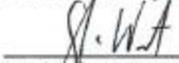
Columbia, SC 29203
City, State and Zip Code

Tommy McDaniel
Administrator/Exec. Director Name (Please Print)

Angela Wright
Authorized Representative (Please print)



Administrator Exec. Director Signature



Authorized Representative Signature

3-10-2020
Date

3/19/2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes: XXX No:

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.
SC DDSN Pee Dee Center, 713 National Cemetery Road, Florence SC 29502-3209
SC DDSN Whitten Center, P O Box 239, Clinton SC 29325

MIDLANDS CENTER

**MEMORANDUM OF AGREEMENT
BETWEEN
WHITTEN CENTER AND MIDLANDS CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION**

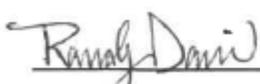
In the event of a natural or man made disaster in either Richland or Laurens County, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Midlands Center or Whitten Center.

Midlands Center agrees to serve as an evacuation site for Whitten Center providing emergency shelter, sleeping accommodations and food for 150 persons when and if, Whitten residences become untenable due to a natural or man made disaster. Likewise, should an emergency evacuation be necessary at Midlands Center, Whitten Center agrees to provide shelter, sleeping accommodations, and food for 115 Midlands service recipients.

Each facility will provide the requisite number of staff to escort service recipients to the designated emergency facility. Host facility will assist the evacuating facility with transportation if needed. It is agreed that staff will remain at the facility receiving evacuees in order to supplement the host facility's staff and to continue individual training programs to the extent feasible. Each facility agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host facility for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Randy Davis 3/6/20
Facility Administrator Date
DDSN Whitten Center
Hwy. 76 E.
Clinton, SC 29325
(864) 833- 2733



Angela Wright 3/10/2020
Facility Administrator Date
DDSN Midlands Center
8301 Farrow Rd
Columbia, SC 29203
(803) 935-7500

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

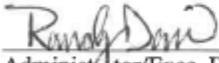
SC DDSN - Campus
Facility Name

MR-16-0164
License Number

PO Box 239
Street Address

Clinton SC 29325
City and Zip Code

Randy Davis
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3/6/20
Date

To Be Completed by Sheltering Facility

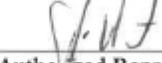
SC DDSN Midlands Center
Sheltering Facility Name

8301 Farrow Rd
Street Address

Same
Mailing Address (if different from above)

Columbia SC, 29203
City, State and Zip Code

Angela Wright
Authorized Representative (Please print)


Authorized Representative Signature

3/10/2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Pee Dee Center, 714 National Cemetery Rd., Florence SC 29502-3209

SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SC DDSN – Central Square

Facility Name

MR-16-0411

License Number

PO Box 239

Street Address

Clinton SC 29325

City and Zip Code

Randy Davis

Administrator/Exec. Director Name (Please print)

Administrator/Exec. Director Signature

Randy Davis

Administrator/Exec. Director Signature

Date

3/6/20

Date

To Be Completed by Sheltering Facility

SC DDSN Midlands Center

Sheltering Facility Name

8301 Farrow Rd

Street Address

Same

Mailing Address (if different from above)

Columbia SC, 29203

City, State and Zip Code

Angela Wright

Authorized Representative (Please print)

Authorized Representative Signature

A. Wright

Authorized Representative Signature

Date

3/10/2020

Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Pee Dee Center, 714 National Cemetery Rd., Florence SC 29502-3209

SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

MEMORANDUM OF AGREEMENT
BETWEEN
MIDLANDS CENTER AND WHITTEN CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION

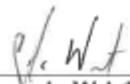
In the event of a natural or man made disaster in either Richland or Laurens County, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Midlands Center or Whitten Center.

Midlands Center agrees to serve as an evacuation site for Whitten Center providing emergency shelter, sleeping accommodations and food for 150 persons when and if, Whitten residences become untenable due to a natural or man made disaster. Likewise, should an emergency evacuation be necessary at Midlands Center, Whitten Center agrees to provide shelter, sleeping accommodations, and food for 115 Midlands service recipients.

Each facility will provide the requisite number of staff to escort service recipients to the designated emergency facility. Host facility will assist the evacuating facility with transportation if needed. It is agreed that staff will remain at the facility receiving evacuees in order to supplement the host facility's staff and to continue individual training programs to the extent feasible. Each facility agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host facility for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

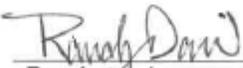
This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Angela Wright
Facility Administrator

DDSN Midlands Center
8301 Farrow Rd
Columbia, SC 29203
(803) 935-7500

3/2/2020
Date



Randy Davis
Facility Administrator

DDSN Whitten Center
Hwy. 76 E.
Clinton, SC 29325
(864) 833-2733

3/9/20
Date

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SCDDSN Midlands Center
Facility Name

MR-16-0103
License Number

8301 Farrow Road
Street Address

Columbia SC 29203
City and Zip Code

Angela Wright
Administrator/Exec. Director Name (Please Print)

Angela Wright
Administrator/Exec. Director Signature

3/2/2020
Date

To Be Completed by Sheltering Facility

SCDDSN Whitten Center
Sheltering Facility Name

HWY. 76 E.
Street Address

PO Box 239
Mailing Address (if different from above)

Clinton SC 29325
City and Zip Code

Randy Davis
Authorized Representative (Please Print)

Randy Davis
Authorized Representative Signature

3/9/20
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Pee Dee Center, 714 National Cemetery Rd., Florence SC 29502-3209

SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

MEMORANDUM OF AGREEMENT
BETWEEN
MIDLANDS CENTER AND COASTAL CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION

In the event of a natural or man made disaster in either Richland or Dorchester County, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Midlands Center or Coastal Center.

Midlands Center agrees to serve as an evacuation site providing emergency shelter, beds, and food for 100 persons from Coastal Center when and if, its residences become untenable due to a natural or man made disaster. Likewise, should Midlands Center need emergency beds because of a similar disaster, Coastal Center will provide 50 emergency beds for Midlands Center.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facility. Further, it is agreed that staff will remain in the facility receiving evacuees in order to supplement the host agency's staff and to continue individual training programs to the extent feasible. Each agency agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The evacuating agency will reimburse the host agency for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. It may be rescinded by either party for any reason. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Angela Wright
Facility Administrator

DDSN Midlands Center
8301 Farrow Rd
Columbia, SC 29203
(803) 935-7500

3/2/2020

Date



Tommy McDaniel
Facility Administrator

DDSN Coastal Center
9995 Jamison RD
Ladson SC 29456
(843) 873- 5750

3-9-2020

Date

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SCDDSN Midlands Center

Facility Name

MR-16-0103

License Number

8301 Farrow Road

Street Address

Columbia SC 29203

City and Zip Code

Angela Wright

Administrator/Exec. Director Name (Please Print)

A. Wright

Administrator/Exec. Director Signature

3/2/2020

Date

To Be Completed by Sheltering Facility

SCDDSN Coastal Center

Sheltering Facility Name

9995 Jamison Road

Street Address

Mailing Address (if different from above)

Summerville SC 29845

City and Zip Code

Tommy McDaniel

Authorized Representative (Please Print)

Tommy McDaniel

Authorized Representative Signature

3-9-2020

Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Pee Dee Center, 714 National Cemetery Rd., Florence SC 29502-3209

SC DDSN Whitten Center, PO box 239, Clinton SC 29325

MEMORANDUM OF AGREEMENT
BETWEEN
MIDLANDS CENTER AND PEE DEE CENTER
FOR
ALTERNATIVE SHELTER

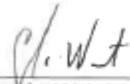
In the event of a natural or man-made disaster in Florence, Darlington or Richland Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential services for persons served at Midlands Center, Pee Dee Center, or Saleeby Center.

Midlands Center agrees to serve as an evacuation site providing 50 emergency beds, and support transportation for Pee Dee or Saleeby Center service recipients when, and if, its residences become untenable due to a natural or man-made disaster. Likewise, should an emergency evacuation be necessary at Midlands Center, Pee Dee/Saleeby Center agrees to provide shelter for 50 beds and support transportation for Midlands service recipients.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facilities. Further, it is agreed that staff will remain in the facility receiving evacuees in order to supplement the host agency's staff and to continue individual training programs to the extent feasible. Each agency agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host agency for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed annually. It may be rescinded by either party for any reason. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.

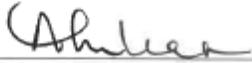


Angela Wright
Facility Administrator

DDSN Midlands Center
8301 Farrow Rd
Columbia, SC 29203
(803) 935-7500

3/2/2020

Date



Amy McLean
Interim Facility Administrator

DDSN Pee Dee Center
714 National Cemetery Rd
Florence SC 29506
(843) 664- 2600

3.9.2020

Date

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SCDDSN Midlands Center

Facility Name

MR-16-0103

License Number

8301 Farrow Road

Street Address

Columbia SC 29203

City and Zip Code

Angela Wright

Administrator/Exec. Director Name (Please Print)

Administrator/Exec. Director Signature

Date

To Be Completed by Sheltering Facility

SCDDSN Pee Dee Center

Sheltering Facility Name

714 National Cemetery Road

Street Address

PO Box 3209

Mailing Address (if different from above)

Florence SC 29502-3209

City and Zip Code

Amy McLean

Authorized Representative (Please Print)

Authorized Representative Signature

Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes XX No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Whitten Center, PO Box 239, Clinton, SC 2932

SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

MEMORANDUM OF AGREEMENT

Between

MIDLANDS CENTER AND PEE DEE CENTER

for

ALTERNATIVE SHELTER

In the event of a natural or man-made disaster in Florence, Darlington or Richland Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential services for persons served at Midlands Center, Pee Dee Center, or Saleeby Center.

Midlands Center agrees to serve as an evacuation site providing 50 emergency beds and support transportation for Pee Dee or Saleeby Center service recipients when, and if, its residences become untenable due to a natural or man-made disaster. Likewise, should an emergency evacuation be necessary at Midlands Center, Pee Dee/Saleeby Center agrees to provide shelter for 50 beds and support transportation for Midlands's service recipients.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facilities. Further, it is agreed that staff will remain in the facility-receiving evacuees in order to supplement the host agency's staff and to continue individual training programs to the extent feasible. Each agency agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host agency for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

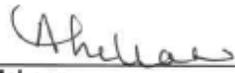
The Memorandum of Agreement being renewed effective **April 1, 2020** and will be renewed annually. It may be rescinded by either party for any reason. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



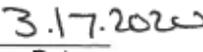
Angela Wright
Facility Administrator
Midlands Center
8301 Farrow Rd.
Columbia, S. C. 29203
(803) 935-7500



Date



Amy McLean
Facility Administrator
Pee Dee Center, SCDDSN
714 National Cemetery Rd.
Florence, S. C. 29506
(843) 664-2600



Date

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SCDDSN – Pee Dee Center – Mulberry Park
Facility Name

MR16-141
License Number

714 National Cemetery Road
Street Address

Florence, SC 29506
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

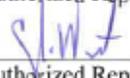
SCDDSN – Midlands Center
Sheltering Facility Name

8301 Farrow Road
Street Address

Mailing Address (if different from above)

Columbia, SC 29203
City, State and Zip Code

Angela Wright
Authorized Representative (Please print)


Authorized Representative Signature

3/19/2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes No

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SCDDSN Whitten Center, PO Box 239, Clinton, SC 29325
SCDDSN Coastal Center, 9995 Jamison Rd., Summerville, SC 29845

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

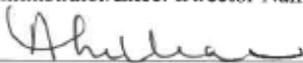
SCDDSN – Pee Dee Center – Pecan Lane
Facility Name

MR16-119
License Number

714 National Cemetery Road
Street Address

Florence, SC 29506
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

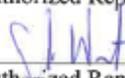
SCDDSN – Midlands Center
Sheltering Facility Name

8301 Farrow Road
Street Address

Mailing Address (if different from above)

Columbia, SC 29203
City, State and Zip Code

Angela Wright
Authorized Representative (Please print)


Authorized Representative Signature

3/18/2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes No

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SCDDSN Whitten Center, PO Box 239, Clinton, SC 29325
SCDDSN Coastal Center, 9995 Jamison Rd., Summerville, SC 29845

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

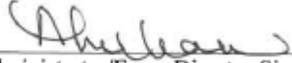
SCDDSN – Thad E. Salceby Center
Facility Name

MR16-341
License Number

714 Lewellen Avenue
Street Address

Hartsville, SC 29550
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

SCDDSN – Midlands Center
Sheltering Facility Name

8301 Farrow Road
Street Address

Mailing Address (if different from above)

Columbia, SC 29203
City, State and Zip Code

Angela Wright
Authorized Representative (Please print)


Authorized Representative Signature

3/18/2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes No

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SCDDSN Whitten Center, PO Box 239, Clinton, SC 29325
SCDDSN Coastal Center, 9995 Jamison Rd., Summerville, SC 29845

MEMORANDUM OF AGREEMENT

BETWEEN

MIDLANDS CENTER AND COASTAL CENTER

FOR

ALTERNATIVE SHELTER AND TRANSPORTATION

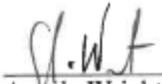
In the event of a natural or man-made disaster in either Richland or Dorchester County, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Midlands Center and Coastal Center.

Midlands Center agrees to serve as an evacuation site for Coastal Center providing emergency shelter, sleeping accommodations and food for 100 persons when and if, Coastal Center residences become untenable due to a natural or man-made disaster. Likewise, should an emergency evacuation be necessary at Midlands Center, Coastal Center agrees to provide 50 emergency beds for Midlands Center.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facility. Further, it is agreed that staff will remain in the facility receiving evacuees in order to supplement the host agency's staff and to continue individual training programs to the extent feasible. Each agrees to provide sufficient transportation for its service recipients while they remain in the host facility's area. Each center's Facility Administrative, or a designee, will be the point of contact and will be present at the host facility's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host facility for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Angela Wright
Facility Administrator
Midlands Center, SCDDSN
8391 Farrow Road
Columbia, SC 29203
803-935-7500

3/19/2020
Date



Tommy McDaniel
Facility Administrator
Coastal Center, SCDDSN
9995 Jamison Road
Summerville, SC 29485
843-873-5750

3-10-2020
Date

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

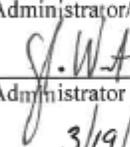
SC DDSN Midlands Center
Facility Name

MR-16-0103
License Number

8301 Farrow Road
Street Address

Columbia, SC 29203
City and Zip Code

Angela Wright
Administrator/Exec. Director Name (Please Print)


Administrator Exec. Director Signature

3/19/2020
Date

To Be Completed by Sheltering Facility

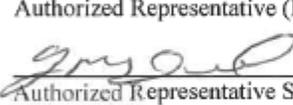
SC DDSN Coastal Center
Sheltering Facility Name

9995 Jamison Road
Street Address

Mailing Address (if different from above)

Summerville, SC 29485
City, State and Zip Code

Tommy McDaniel
Authorized Representative (Please print)


Authorized Representative Signature

3-10-2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes: XXX No:

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.
SC DDSN Pee Dee Center, 713 National Cemetery Road, Florence SC 29502-3209
SC DDSN Whitten Center, P O Box 239, Clinton SC 29325

PEE DEE/SALEEBY CENTER



Lee County Disabilities & Special Needs Board

"Taking part in the world."

Post Office Box 458

Bishopville, South Carolina 29010

(803) 484-9473 Fax: (803) 484-5710

info.ledsn.org

LETTER OF AGREEMENT

between

Lee County Disabilities and Special Needs Board, Inc.

and

South Carolina Department of Disabilities and Special Needs Board

(District II - Pee Dee)

July 1, 2020 through June 30, 2021

Emergency Contact Person for Lee Co. DSN Board – Shontenna Jett, Executive Director

Phone 803-484-9473 ext. 223 e-mail [-sjett@ledsn.org](mailto:sjett@ledsn.org)

Pee Dee Regional Center agrees to serve as a sheltering facility for Lee County Disabilities and Special Needs Board by providing housing and support during emergencies/disasters requiring evacuation/relocation from Lee County provided that the Pee Dee Regional Center is capable of serving as a sheltering facility. Shelter/support will be provided according to the following information:

- 1. Participant (resident) relocation**
- A. 1. ICF/MR Program - 16**
- B. Sleeping accommodations for relocated participants**
 - 1. Participants will be housed at Pee Dee Regional Center (specific location to be determined at time of evacuation/relocation).**
 - 2. Sleeping accommodations will be provided for each participant.**
 - 3. LCDSN will provide bed linens, blankets, and pillows for each participant.**
- C. Meals for relocated participants**
 - 1. Three (3) meals per day will be provided.**
 - 2. LCDSN will notify Pee Dee Regional Center personnel of any special dietary requirements prior to the evacuation relocation.**

- D. Medical support for relocated participants
 1. LCDSN will bring adequate nursing staff for routine medical treatments, medication dispensing, etc. required by relocation of participants.
 2. LCDSN will arrange for emergency medical treatment through a hospital if required.
 3. LCDSN will assure the appropriate/necessary supply of routine medication/prescriptions for each participant is available/provided.
 4. LCDSN will notify Pee Dee Regional Center personnel of special needs/services required prior to evacuation relocation.

II. Lee County Disabilities & Special Needs staff relocation

- A. Maximum number of staff to be relocated
 1. 10
- B. Sleeping accommodations for relocated staff
 1. On duty staff will be housed in the same location of Pee Dee Regional Center as the participants.
- C. Meals for relocated staff

Three (3) meals per day will be provided for on-duty staff by Pee Dee Center. LCDSN will reimburse Pee Dee Center for cost of meals.

III. SUMMARY

- A. Total number of participants to be relocated: 16
- B. Total number of staff to be relocated: 10
- C. Total number of evacuees: 26

***** The terms and conditions of this agreement will commence July 1, 2020 through June 30, 2021.

Pee Dee Regional Center Representative

Aly McLean, Facility Admin.
Signature/Title

5/4/2020
Date

Lee County DSN Board Representative

[Signature]
Signature/Title

4/16/2020
Date

**** Addendum to agreement: Transportation for individuals and staff will be provided by Lee Co. DSN Board to and from Pee Dee Regional Center. Supplies will be replenished after 4 days from the emergency supply kits located on vans of Lee Co. DSN Board if this becomes necessary.

MEMORANDUM OF AGREEMENT
BETWEEN
WHITTEN CENTER AND SALEEBY, PEE DEE CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION

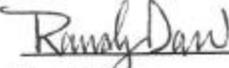
In the event of a natural or man-made disaster in Florence, Darlington or Laurens Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Saleeby, Pee Dee and Whitten Center.

Whitten Center agrees to provide 100 beds, food and supporting transportation for Pee Dee or Saleeby service recipients if and when, its residences become untenable due to a natural or man made disaster. Likewise, should an emergency evacuation be necessary at Whitten Center, Saleeby, Pee Dee Center agrees to provide shelter, sleeping accommodations, and food for 50 Whitten Center service recipients.

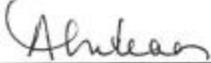
Each facility will provide the requisite number of staff to escort service recipients to the designated emergency facility. Host facility will assist the evacuating facility with transportation if needed. It is agreed that staff will remain at the facility receiving evacuees in order to supplement the host facility's staff and to continue individual training programs to the extent feasible. Each facility agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The using agency will reimburse the host agency for expenses incurred for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Randy Davis 3/16/20
Facility Administrator Date
Whitten Center, SCDDSN
Hwy. 76 E. 8301 Farrow Rd
Clinton, SC 29325
(864) 833-2733



Amy McLean 3/11/2020
Facility Administrator Date
Pee Dee & Saleeby Center, SCDDSN
714 National Cemetery Rd.
Florence, SC 29506
(843) 664-2600

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

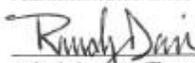
SC DDSN – Campus
Facility Name

MR-16-0164
License Number

PO Box 239
Street Address

Clinton SC 29325
City and Zip Code

Randy Davis
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3/6/20
Date

To Be Completed by Sheltering Facility

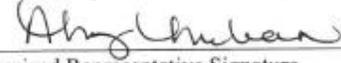
SC DDSN Pee Dee Center
Sheltering Facility Name

714 National Cemetery Road
Street Address

Same
Mailing Address (if different from above)

Florence, SC 29506
City, State and Zip Code

Amy McLean
Authorized Representative (Please print)


Authorized Representative Signature

3.11.2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Midlands Center, 8301 Farrow Rd. Columbia SC 29203

SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SC DDSN – Central Square
Facility Name

MR-16-0411
License Number

PO Box 239
Street Address

Clinton SC 29325
City and Zip Code

Randy Davis
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3/16/20
Date

To Be Completed by Sheltering Facility

SC DDSN Pee Dee Center
Sheltering Facility Name

714 National Cemetery Road
Street Address

Same
Mailing Address (if different from above)

Florence, SC 29506
City, State and Zip Code

Amy McLean
Authorized Representative (Please print)


Authorized Representative Signature

3.11.2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Midlands Center, 8301 Farrow Rd. Columbia SC 29203

SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

MEMORANDUM OF AGREEMENT

Between

SALEEBY, PEE DEE AND WHITTEN CENTER

for

ALTERNATIVE SHELTER

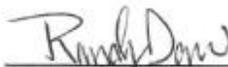
In the event of a natural or man-made disaster in Florence, Darlington or Laurens Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Saleeby, Pee Dee and Whitten Centers.

Whitten Center agrees to provide 100 emergency beds and support transportation for Pee Dee or Saleeby Center service recipients when, and if, its residences become untenable due to natural or man-made disaster. Likewise, should Whitten Center need emergency beds because of a similar disaster, Saleeby, Pee Dee Center will provide 50 emergency shelter beds and support transportation for Whitten Center.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facilities. Further, it is agreed that staff will remain in the facility-receiving evacuees in order to supplement the host agency staff and continue individual training programs to the extent feasible. Each agency agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Saleeby and Pee Dee Centers' Administrative/Program Services or designee will be the point of contact and present at Whitten Center to supervise/coordinate necessary actions. If Whitten Center places residential service recipients at Pee Dee or Saleeby Centers, the Whitten Facility Administrator, or designee, will be the point of contact and present at Saleeby or Pee Dee Centers for supervision/coordination.

The using agency will reimburse the host agency for additional expenses for food, lodging, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

The Memorandum of Agreement became effective **April 1, 2020** and will be renewed annually. It may be rescinded by either party for any reason. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Randy Davis
Facility Administrator
Whitten Center, SCDDSN
P. O. Box 239
Clinton, S. C. 29325
(864) 938-3422

3/19/20

Date



Amy McLean
Facility Administrator
Pee Dee Center & Saleeby Center, SCDDSN
714 National Cemetery Rd.
Florence, S. C. 29506
(843) 664-2600

3.17.2020

Date

Emergency Evacuation Plan Statement

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To Be Completed by Evacuation Facility

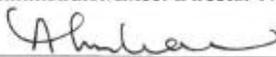
SCDDSN – Pee Dee Center – Mulberry Park
Facility Name

MR16-141
License Number

714 National Cemetery Road
Street Address

Florence, SC 29506
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

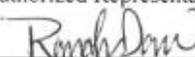
SCDDSN – Whitten Center
Sheltering Facility Name

28373 Hwy 76 E
Street Address

P. O. Box 239
Mailing Address (if different from above)

Clinton, SC 29325-5328
City, State and Zip Code

Randy Davis
Authorized Representative (Please print)


Authorized Representative Signature

3/19/20
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes No

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SCDDSN Coastal Center, 9995 Miles-Jamison Rd., Summerville, SC 29485
SCDDSN Midlands Center, 8301 Farrow Rd, Columbia, SC 29203

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SCDDSN – Pee Dee Center – Pecan Lane
Facility Name

MR16-119
License Number

714 National Cemetery Road
Street Address

Florence, SC 29506
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

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To Be Completed by Evacuation Facility

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Facility Name

MR16-341
License Number

714 Lewellen Avenue
Street Address

Hartsville, SC 29550
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

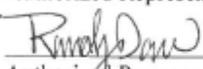
SCDDSN – Whitten Center
Sheltering Facility Name

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SCDDSN Coastal Center, 9995 Miles-Jamison Rd., Summerville, SC 29485
SCDDSN Midlands Center, 8301 Farrow Rd, Columbia, SC 29203

MEMORANDUM OF AGREEMENT

Between

PEE DEE AND FLORENCE COUNTY DSN (THE OAKS)

for

ALTERNATIVE SHELTER

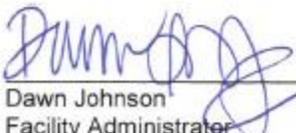
In the event of a natural or man-made disaster in Florence or Timmons County, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Pee Dee Center and Florence County DSN, The Oaks.

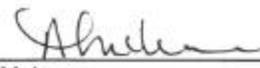
Whitten Center agrees to provide 100 emergency beds and support transportation for Pee Dee or Saleeby Center service recipients when, and if, its residences become untenable due to natural or man-made disaster. Likewise, should Whitten Center need emergency beds because of a similar disaster, Saleeby, Pee Dee Center will provide 50 emergency shelter beds and support transportation for Whitten Center.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facilities. Further, it is agreed that staff will remain in the facility-receiving evacuees in order to supplement the host agency staff and continue individual training programs to the extent feasible. Each agency agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Saleeby and Pee Dee Centers' Administrative/Program Services or designee will be the point of contact and present at Whitten Center to supervise/coordinate necessary actions. If Whitten Center places residential service recipients at Pee Dee or Saleeby Centers, the Whitten Facility Administrator, or designee, will be the point of contact and present at Saleeby or Pee Dee Centers for supervision/coordination.

The using agency will reimburse the host agency for additional expenses for food, lodging, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

The Memorandum of Agreement became effective **April 1, 2020** and will be renewed annually. It may be rescinded by either party for any reason. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.

 4/1/2020
Date
Dawn Johnson
Facility Administrator
Florence County DSN, The Oaks
108 North Pinckney
Timmonsville, S. C. 29161
(843) 678-8576

 3-17-2020
Date
Amy McLean
Facility Administrator
Pee Dee Center & Saleeby Center, SCDDSN
714 National Cemetery Rd.
Florence, S. C. 29506
(843) 664-2600

Emergency Evacuation Plan Statement

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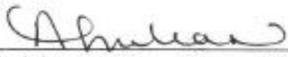
SCDDSN – Pee Dee Center – Mulberry Park
Facility Name

MR16-141
License Number

714 National Cemetery Road
Street Address

Florence, SC 29506
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

Florence County- DSN (The Oaks)
Sheltering Facility Name

108 North Pinckney
Street Address

108 North Pinckney
Mailing Address (if different from above)

Timmons ville, SC 29161
City, State and Zip Code

Dawn Johnson
Authorized Representative (Please print)


Authorized Representative Signature

4/1/2020
Date

MEMORANDUM OF AGREEMENT

Between

MIDLANDS CENTER AND PEE DEE CENTER

for

ALTERNATIVE SHELTER

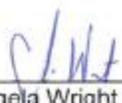
In the event of a natural or man-made disaster in Florence, Darlington or Richland Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential services for persons served at Midlands Center, Pee Dee Center, or Saleeby Center.

Midlands Center agrees to serve as an evacuation site providing 50 emergency beds and support transportation for Pee Dee or Saleeby Center service recipients when, and if, its residences become untenable due to a natural or man-made disaster. Likewise, should an emergency evacuation be necessary at Midlands Center, Pee Dee/Saleeby Center agrees to provide shelter for 50 beds and support transportation for Midlands's service recipients.

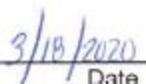
Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facilities. Further, it is agreed that staff will remain in the facility-receiving evacuees in order to supplement the host agency's staff and to continue individual training programs to the extent feasible. Each agency agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host agency for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

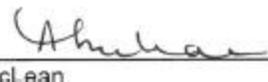
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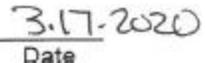
Angela Wright
Facility Administrator
Midlands Center
8301 Farrow Rd.
Columbia, S. C. 29203
(803) 935-7500



Date



Amy McLean
Facility Administrator
Pee Dee Center, SCDDSN
714 National Cemetery Rd.
Florence, S. C. 29506
(843) 664-2600



Date

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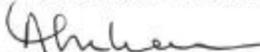
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City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

SCDDSN – Midlands Center
Sheltering Facility Name

8301 Farrow Road
Street Address

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City, State and Zip Code

Angela Wright
Authorized Representative (Please print)


Authorized Representative Signature

3/18/2020
Date

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SCDDSN Coastal Center, 9995 Jamison Rd., Summerville, SC 29845

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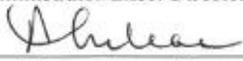
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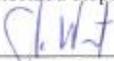
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City and Zip Code

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Administrator/Exec. Director Name (Please print)


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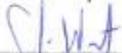
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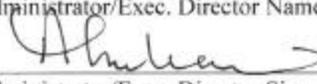
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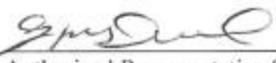
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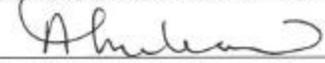
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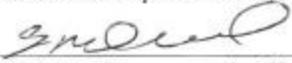
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Emergency Evacuation Plan Statement

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In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

To Be Completed by Sheltering Facility

SCDDSN – Thad E. Saleeby Center
Facility Name

SCDDSN – Coastal Center
Sheltering Facility Name

MR16-341
License Number

9995 Miles-Jamison Rd.
Street Address

714 Lewellen Avenue
Street Address

Mailing Address (if different from above)

Hartsville 29550
City and Zip Code

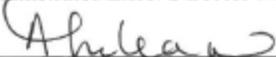
Summerville, S. C. 29485
City, State and Zip Code

Amy McLean

Tommy McDaniel

Administrator/Exec. Director Name (Please print)

Authorized Representative (Please print)


Administrator/Exec. Director Signature


Authorized Representative Signature

3.17.2020
Date

3-19-2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes √ No

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SCDDSN Whitten Center, PO Box 239, Clinton, SC 29325

SCDDSN Midlands Center, 8301 Farrow Rd, Columbia, SC 29203

MEMORANDUM OF AGREEMENT

BETWEEN

SALEEBY, PEE DEE AND COASTAL CENTER

FOR

ALTERNATIVE SHELTER AND TRANSPORTATION

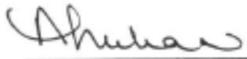
In the event of a natural or man-made disaster in either Dorchester, Florence, or Darlington Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Saleeby Center, Pee Dee Center and Coastal Center.

Pee Dee Center or Saleeby Center agrees to provide 50 emergency beds and support transportation for Coastal Center service recipients when, and if, its residences become untenable due to natural or man-made disasters. Likewise, should Pee Dee Center or Saleeby Center need emergency beds because of a similar disaster, Coastal Center will provide 50 emergency beds and support transportation for Pee Dee Center or Saleeby Center.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facility. Further, it is agreed that staff will remain at the facility receiving evacuees in order to supplement the host facility's staff and to continue individual training programs to the extent feasible. Each facility agrees to provide sufficient transportation for its service recipients while they remain in the host facility's area. Each center's Facility Administrative, or a designee, will be the point of contact and will be present at the host facility's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host facility for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.

 3.17.2020
Amy McClean Date
Facility Administrator
Pee Dee Center, SCDDSN
714 National Cemetery Road
Florence, SC 29506
843-664-2635

 3-10-2020
Tommy McDaniel Date
Facility Administrator
Coastal Center, SCDDSN
9995 Jamison Road
Summerville, SC 29485
843-873-5750

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

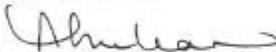
SC DDSN Thad E. Saleeby Center
Facility Name

MR-16-341
License Number

714 Lewellen Avenue
Street Address

Hartsville, SC 29550
City and Zip Code

Amy McClean
Administrator/Exec. Director Name (Please Print)


Administrator Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

SC DDSN Coastal Center
Sheltering Facility Name

9995 Jamison Road
Street Address

Mailing Address (if different from above)

Summerville, SC 29485
City, State and Zip Code

Tommy McDaniel
Authorized Representative (Please print)


Authorized Representative Signature

3-10-2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes: XXX No:

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.
SC DDSN Pee Dee Center, 713 National Cemetery Road, Florence SC 29502-3209
SC DDSN Whitten Center, P O Box 239, Clinton SC 29325

MEMORANDUM OF AGREEMENT
BETWEEN
MIDLANDS CENTER AND PEE DEE CENTER
FOR
ALTERNATIVE SHELTER

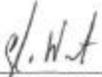
In the event of a natural or man-made disaster in Florence, Darlington or Richland Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential services for persons served at Midlands Center, Pee Dee Center, or Saleeby Center.

Midlands Center agrees to serve as an evacuation site providing 50 emergency beds, and support transportation for Pee Dee or Saleeby Center service recipients when, and if, its residences become untenable due to a natural or man-made disaster. Likewise, should an emergency evacuation be necessary at Midlands Center, Pee Dee/Saleeby Center agrees to provide shelter for 50 beds and support transportation for Midlands service recipients.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facilities. Further, it is agreed that staff will remain in the facility receiving evacuees in order to supplement the host agency's staff and to continue individual training programs to the extent feasible. Each agency agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host agency for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

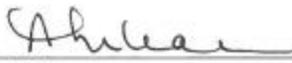
This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed annually. It may be rescinded by either party for any reason. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Angela Wright
Facility Administrator
DDSN Midlands Center
8301 Farrow Rd
Columbia, SC 29203
(803) 935-7500

3/2/2020

Date



Amy McLean
Interim Facility Administrator
DDSN Pee Dee Center
714 National Cemetery Rd
Florence SC 29506
(843) 664-2600

3.9.20

Date

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SCDDSN Midlands Center
Facility Name

MR-16-0103
License Number

8301 Farrow Road
Street Address

Columbia SC 29203
City and Zip Code

Angela Wright
Administrator/Exec. Director Name (Please Print)

A. Wright
Administrator/Exec. Director Signature

3/2/2020
Date

To Be Completed by Sheltering Facility

SCDDSN Pee Dee Center
Sheltering Facility Name

714 National Cemetery Road
Street Address

PO Box 3209
Mailing Address (if different from above)

Florence SC 29502-3209
City and Zip Code

Amy McLean
Authorized Representative (Please Print)

A. McLean
Authorized Representative Signature

3.9.2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Whitten Center, PO Box 239, Clinton, SC 2932

SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

WHITTEN CENTER



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

March 20, 2020

Whitten Center
P. O. Box 239
Highway 76 East
Clinton, SC 29325

Dear Sirs:

The Clinton Family YMCA will gladly assist Whitten Center with use of the Clinton Family YMCA gymnasium and full facility for use during a natural disaster and/or emergency.

The Clinton Family YMCA can provide its large gymnasium, auxiliary gymnasium and locker facilities with showers and dressing facilities, as needed. Additionally, the YMCA has a large meeting/conference room area for food service to accommodate 50 – 70 persons.

The Clinton Family YMCA is happy to assist Whitten Center as an emergency shelter in the event of need for 2020, 2021 and beyond.

If any additional details or questions arise please feel free to call me or visit the site at any time.

Sincerely,

Gene Simmons, CEO
Clinton Family YMCA
Clinton, SC 29325
gsimmons@clintonyymca.org
(864) 833-1555

CLINTON FAMILY YMCA
P.O. Box 492
Clinton, SC 29325-0492
(864) 833-1555 FAX (864) 833-3958
www.clintonyymca.org

MEMORANDUM OF AGREEMENT
BETWEEN
WHITTEN CENTER AND COASTAL CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION

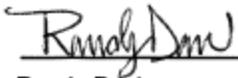
In the event of a natural or man-made disaster in Laurens or Dorchester Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Whitten Center and Coastal Center.

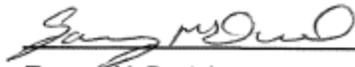
Whitten Center agrees to serve as an evacuation site for Coastal Center providing emergency shelter, sleeping accommodations and food for 60 persons when and if, Coastal Center becomes untenable due to a natural or man-made disaster. Likewise, should an emergency evacuation be necessary at Whitten Center, Coastal Center agrees to provide shelter, sleeping accommodations, and food for 50 Whitten Center service recipients.

Each facility will provide the requisite number of staff to escort service recipients to the designated emergency facility. Host facility will assist the evacuating facility with transportation if needed. It is agreed that staff will remain at the facility receiving evacuees in order to supplement the host facility's staff and to continue individual training programs to the extent feasible. Each facility agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's Facility Administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host facility for expenses incurred for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.

 3/6/20
Date
Randy Davis
Facility Administrator
Whitten Center, SCDDSN
Hwy. 76 E. 8301 Farrow Rd
Clinton, SC 29325
(864) 833-2733

 3-9-2020
Date
Tommy McDaniel
Facility Administrator
Coastal Center, SCDDSN
9995 Jamison Rd.
Summerville, SC 29485
(843) 873-5750

MEMORANDUM OF AGREEMENT
BETWEEN
WHITTEN CENTER AND MIDLANDS CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION

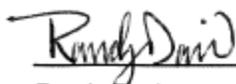
In the event of a natural or man made disaster in either Richland or Laurens County, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Midlands Center or Whitten Center.

Midlands Center agrees to serve as an evacuation site for Whitten Center providing emergency shelter, sleeping accommodations and food for 150 persons when and if, Whitten residences become untenable due to a natural or man made disaster. Likewise, should an emergency evacuation be necessary at Midlands Center, Whitten Center agrees to provide shelter, sleeping accommodations, and food for 115 Midlands service recipients.

Each facility will provide the requisite number of staff to escort service recipients to the designated emergency facility. Host facility will assist the evacuating facility with transportation if needed. It is agreed that staff will remain at the facility receiving evacuees in order to supplement the host facility's staff and to continue individual training programs to the extent feasible. Each facility agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

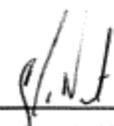
The evacuating facility will reimburse the host facility for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Randy Davis
Facility Administrator
DDSN Whitten Center
Hwy. 76 E.
Clinton, SC 29325
(864) 833- 2733

3/10/20
Date



Angela Wright
Facility Administrator
DDSN Midlands Center
8301 Farrow Rd
Columbia, SC 29203
(803) 935-7500

3/10/2020
Date

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SC DDSN – Central Square
Facility Name

MR-16-0411
License Number

PO Box 239
Street Address

Clinton SC 29325
City and Zip Code

Randy Davis
Administrator/Exec. Director Name (Please print)

Randy Davis
Administrator/Exec. Director Signature

3/6/20
Date

To Be Completed by Sheltering Facility

SC DDSN Midlands Center
Sheltering Facility Name

8301 Farrow Rd
Street Address

Same
Mailing Address (if different from above)

Columbia SC, 29203
City, State and Zip Code

Angela Wright
Authorized Representative (Please print)

Angela Wright
Authorized Representative Signature

3/10/2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Pee Dee Center, 714 National Cemetery Rd., Florence SC 29502-3209

SC DDSN Coastal Center, 9995 Jamison Rd. Summerville, SC. 29845

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

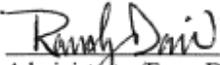
SC DDSN - Campus
Facility Name

MR-16-0164
License Number

PO Box 239
Street Address

Clinton SC 29325
City and Zip Code

Randy Davis
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3/10/20
Date

To Be Completed by Sheltering Facility

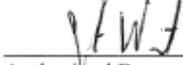
SC DDSN Midlands Center
Sheltering Facility Name

8301 Farrow Rd
Street Address

Same
Mailing Address (if different from above)

Columbia SC, 29203
City, State and Zip Code

Angela Wright
Authorized Representative (Please print)


Authorized Representative Signature

3/10/2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Pee Dee Center, 714 National Cemetery Rd., Florence SC 29502-3209

SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

MEMORANDUM OF AGREEMENT
BETWEEN
MIDLANDS CENTER AND WHITTEN CENTER
FOR
ALTERNATIVE SHELTER AND TRANSPORTATION

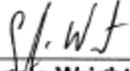
In the event of a natural or man made disaster in either Richland or Laurens County, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Midlands Center or Whitten Center.

Midlands Center agrees to serve as an evacuation site for Whitten Center providing emergency shelter, sleeping accommodations and food for 150 persons when and if, Whitten residences become untenable due to a natural or man made disaster. Likewise, should an emergency evacuation be necessary at Midlands Center, Whitten Center agrees to provide shelter, sleeping accommodations, and food for 115 Midlands service recipients.

Each facility will provide the requisite number of staff to escort service recipients to the designated emergency facility. Host facility will assist the evacuating facility with transportation if needed. It is agreed that staff will remain at the facility receiving evacuees in order to supplement the host facility's staff and to continue individual training programs to the extent feasible. Each facility agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Each center's facility administrator, or a designee, will be the point of contact and will be present at the host agency's location to supervise/coordinate necessary actions.

The evacuating facility will reimburse the host facility for additional expenses for food, lodging, medications, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

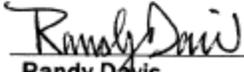
This Memorandum of Agreement is being renewed effective **April 1, 2020** and will be renewed again annually. Either party for any reason may rescind it. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.



Angela Wright
Facility Administrator

DDSN Midlands Center
8301 Farrow Rd
Columbia, SC 29203
(803) 935-7500

3/2/2020
Date



Randy Davis
Facility Administrator

DDSN Whitten Center
Hwy. 76 E.
Clinton, SC 29325
(864) 833- 2733

3/9/20
Date

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

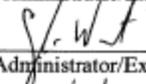
In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

PLEASE NOTE: If any information in the EEP on file has changed, e.g., number of beds, licensee, or physical address change, a new plan is required prior to issuance of your license.

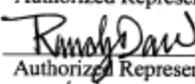
Annual Letter of Agreement for Emergency Evacuation Plan

As administrator, I acknowledge by completion of the Emergency Evacuation Statement below and signature, that the EEP on file with DHEC is still current. The evacuation location facility representative has agreed with this statement by completion of requested information and signature.

To Be Completed by Evacuation Facility

SCDDSN Midlands Center
 Facility Name
MR-16-0103
 License Number
8301 Farrow Road
 Street Address
Columbia SC 29203
 City and Zip Code
Angela Wright
 Administrator/Exec. Director Name (Please Print)
 3/2/2020
 Administrator/Exec. Director Signature
 Date 3/2/2020

To Be Completed by Sheltering Facility

SCDDSN Whitten Center
 Sheltering Facility Name
HWY. 76 E.
 Street Address
PO Box 239
 Mailing Address (if different from above)
Clinton SC 29325
 City and Zip Code
Randy Davis
 Authorized Representative (Please Print)

 Authorized Representative Signature
 Date 3/9/20

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

- SC DDSN Pee Dee Center, 714 National Cemetery Rd., Florence SC 29502-3209
- SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

Emergency Evacuation Plan Statement

The SC Department of Health & Environmental Control (DHEC) requires health care facilities to provide an Emergency Evacuation Plan (EEP) prior to initial and renewal licensure. While your facility has submitted a plan, DHEC requires an annual letter of agreement signed by an authorized representative of the evacuating facility and by each sheltering facility be submitted. This agreement must be submitted to DHEC with the license renewal packet prior to relicensing.

In an effort to expedite the licensure renewal process, if the current EEP on file at DHEC is still accurate, then the information below must be completed by the administrator and by the authorized representative of the sheltering facility for each sheltering facility prior to relicensing. For facilities located in Beaufort, Berkeley, Charleston, Colleton, Dorchester, Horry, Jasper, and Georgetown counties, at least one sheltering facility shall be located in a county other than these counties.

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Annual Letter of Agreement for Emergency Evacuation Plan

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To Be Completed by Evacuation Facility

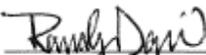
SC DDSN – Central Square
Facility Name

MR-16-0411
License Number

PO Box 239
Street Address

Clinton SC 29325
City and Zip Code

Randy Davis
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3/6/20
Date

To Be Completed by Sheltering Facility

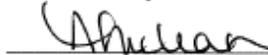
SC DDSN Pee Dee Center
Sheltering Facility Name

714 National Cemetery Road
Street Address

Same
Mailing Address (if different from above)

Florence, SC 29506
City, State and Zip Code

Amy McLean
Authorized Representative (Please print)


Authorized Representative Signature

3.11.2020
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SC DDSN Midlands Center, 8301 Farrow Rd. Columbia SC 29203

SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

Emergency Evacuation Plan Statement

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To Be Completed by Evacuation Facility

SC DDSN – Campus

Facility Name

MR-16-0164

License Number

PO Box 239

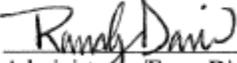
Street Address

Clinton SC 29325

City and Zip Code

Randy Davis

Administrator/Exec. Director Name (Please print)



Administrator/Exec. Director Signature

3/6/20

Date

To Be Completed by Sheltering Facility

SC DDSN Pee Dee Center

Sheltering Facility Name

714 National Cemetery Road

Street Address

Same

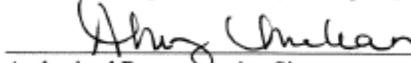
Mailing Address (if different from above)

Florence, SC 29506

City, State and Zip Code

Amy McLean

Authorized Representative (Please print)



Authorized Representative Signature

3. 11. 2020

Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes **XX** No _____

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SC DDSN Midlands Center, 8301 Farrow Rd. Columbia SC 29203

SC DDSN Coastal Center, 9995 Jamison Rd, Summerville, SC 29845

MEMORANDUM OF AGREEMENT

Between

SALEEBY, PEE DEE AND WHITTEN CENTER

for

ALTERNATIVE SHELTER

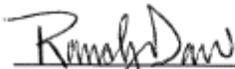
In the event of a natural or man-made disaster in Florence, Darlington or Laurens Counties, it is possible that one or more of the respective agencies' residential facilities could be damaged or otherwise rendered unsafe for occupancy. The purpose of this memorandum is to establish a mutual support agreement for temporary emergency residential and transportation services for persons served at Saleeby, Pee Dee and Whitten Centers.

Whitten Center agrees to provide 100 emergency beds and support transportation for Pee Dee or Saleeby Center service recipients when, and if, its residences become untenable due to natural or man-made disaster. Likewise, should Whitten Center need emergency beds because of a similar disaster, Saleeby, Pee Dee Center will provide 50 emergency shelter beds and support transportation for Whitten Center.

Each agency will provide the requisite number of staff to escort service recipients to the designated emergency facilities. Further, it is agreed that staff will remain in the facility-receiving evacuees in order to supplement the host agency staff and continue individual training programs to the extent feasible. Each agency agrees to provide sufficient transportation for its service recipients while they remain in the host agency area. Saleeby and Pee Dee Centers' Administrative/Program Services or designee will be the point of contact and present at Whitten Center to supervise/coordinate necessary actions. If Whitten Center places residential service recipients at Pee Dee or Saleeby Centers, the Whitten Facility Administrator, or designee, will be the point of contact and present at Saleeby or Pee Dee Centers for supervision/coordination.

The using agency will reimburse the host agency for additional expenses for food, lodging, and other incidental expenses incurred as a result of fulfilling the intent of this agreement.

The Memorandum of Agreement became effective **April 1, 2020** and will be renewed annually. It may be rescinded by either party for any reason. If either party desires to cancel this Agreement, a thirty (30) day advance notice is desired.


Randy Davis

Facility Administrator
Whitten Center, SCDDSN
P. O. Box 239
Clinton, S. C. 29325
(864) 938-3422

3/19/20
Date


Amy McLean

Facility Administrator
Pee Dee Center & Saleeby Center, SCDDSN
714 National Cemetery Rd.
Florence, S. C. 29506
(843) 664-2600

3.17.2020
Date

Emergency Evacuation Plan Statement

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To Be Completed by Evacuation Facility

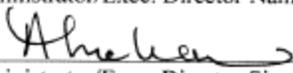
SCDDSN – Pee Dee Center – Mulberry Park
Facility Name

MR16-141
License Number

714 National Cemetery Road
Street Address

Florence, SC 29506
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

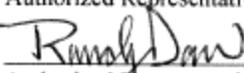
SCDDSN – Whitten Center
Sheltering Facility Name

28373 Hwy 76 E
Street Address

P. O. Box 239
Mailing Address (if different from above)

Clinton, SC 29325-5328
City, State and Zip Code

Randy Davis
Authorized Representative (Please print)


Authorized Representative Signature

3/19/20
Date

To be Completed by Administrator

Is there more than one sheltering facility listed in the EEP? Yes No

If yes, please list all facilities and attach a separate signed Annual Letter of Agreement for each facility.

SCDDSN Coastal Center, 9995 Miles-Jamison Rd., Summerville, SC 29485
SCDDSN Midlands Center, 8301 Farrow Rd. Columbia, SC 29203

Emergency Evacuation Plan Statement

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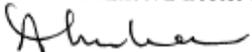
SCDDSN – Pee Dee Center – Pecan Lane
Facility Name

MR16-119
License Number

714 National Cemetery Road
Street Address

Florence, SC 29506
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

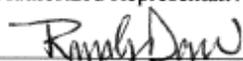
SCDDSN – Whitten Center
Sheltering Facility Name

28373 Hwy 76 E
Street Address

P. O. Box 239
Mailing Address (if different from above)

Clinton, SC 29325-5328
City, State and Zip Code

Randy Davis
Authorized Representative (Please print)


Authorized Representative Signature

3/19/20
Date

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SCDDSN Midlands Center, 8301 Farrow Rd. Columbia, SC 29203

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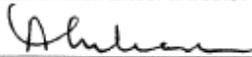
SCDDSN – Thad E. Saleeby Center
Facility Name

MR16-341
License Number

714 Lewellen Avenue
Street Address

Hartsville, SC 29550
City and Zip Code

Amy McLean
Administrator/Exec. Director Name (Please print)


Administrator/Exec. Director Signature

3.17.2020
Date

To Be Completed by Sheltering Facility

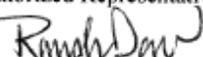
SCDDSN – Whitten Center
Sheltering Facility Name

28373 Hwy 76 E
Street Address

P. O. Box 239
Mailing Address (if different from above)

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City, State and Zip Code

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